

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____

b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESVR. Other _____

2. NAME OF OPERATOR
DOME PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR
501 Airport Drive, Suite 107, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 1460' FNL, 870' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO. _____ DATE ISSUED _____

5. LEASE DESIGNATION AND SERIAL NO.

NM 9787

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

DOME FEDERAL 17-27-13

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

WAW PICTURED CLIFF

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

SEC. 17, T27N, R13W

12. COUNTY OR PARISH

SAN JUAN

13. STATE

NEW MEXICO

15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 19. ELEV. CASINGHEAD

04/28/79 05/02/79 5-30-79 6038' GR 6038'

20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 25. WAS DIRECTIONAL SURVEY MADE

1506 1465 --- --- 1339' - 1440' PICTURED CLIFF NO

26. TYPE ELECTRIC AND OTHER LOGS RUN 27. WAS WELL CORED

INDUCTION ELECTRIC LOG, FORMATION DENSITY/NEUTRON NO

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"	20#	41'	8 3/4"	35 sacks	NONE
2 7/8"	6.50#	1495'	5"	175 sacks	NONE

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

1341' - 1347' with 2 jet shots/ft.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
<u>1341' - 1347'</u>	<u>250 gal. 7 1/2% HCl. Foam frac with 28000# 20-40 sand</u>

33.* PRODUCTION

DATE FIRST PRODUCTION 05/09/79 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) FLOWING

DATE OF TEST 05/30/79 HOURS TESTED 3 CHOKE SIZE 3/4" PROD'N. FOR TEST PERIOD --- OIL—BBL. 0 GAS—MCF. 140

FLOW. TUBING PRESS. 68 psi CASING PRESSURE SIP-240 CALCULATED 24-HOUR RATE --- OIL—BBL. 0 GAS—MCF. 1122 WATER—BBL. ---

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TO BE SOLD - TEST VENTED TEST WITNESSED BY H. D. HOLLINGSWORTH

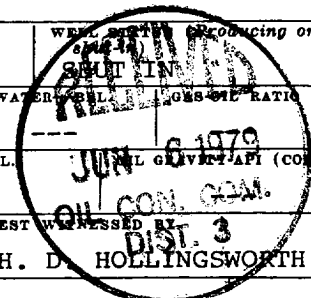
35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED H. D. HOLLINGSWORTH TITLE DRILLING FOREMAN DATE June 4, 1979

*(See Instructions and Spaces for Additional Data on Reverse Side)

NMOCC



INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37 SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING BOTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

DESCRIPTION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
38. GEOLOGIC MARKERS			
	MEAS. DEPTH	TOP	
		TRUE VERT. DEPTH	
	NAME		
	PICTURED CLIFF	1339	
	FRUITLAND	897	
	FARMINGTON	524	