

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 _____		5. LEASE DESIGNATION AND SERIAL NO. SF 098895	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---	
2. NAME OF OPERATOR DEKALB Energy Company		7. UNIT AGREEMENT NAME ---	
3. ADDRESS OF OPERATOR 1625 Broadway Denver, CO 80202		8. FARM OR LEASE NAME Federal 18	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 940' FSL, 1629' FWL SE SW At top prod. interval reported below same At total depth same		9. WELL NO. 24	
14. PERMIT NO. 30-045-28397		10. FIELD AND POOL OR WILDCAT Basin Fruitland Coal	
15. DATE SPUDDED 11-25-90		11. SEC. T. R. M. OR BLOCK AND SURVEY OR AREA Sec. 18, T27N-R11W	
16. DATE T.D. REACHED 11-27-90		12. COUNTY OR PARISH San Juan NM	
17. DATE COMPL. (Ready to prod.) 03-13-91		13. ELEVATIONS (DF, R&B, RT, GR, ETC.)* 6127' GR 6141' KB	
20. TOTAL DEPTH, MD & TVD 1995'		21. PLUG BACK T.D., MD & TVD --	
22. IF MULTIPLE COMPL. HOW MANY* --		23. INTERVALS DRILLED BY ROTARY TOOLS surf to 1995'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1723-46 OA Fruitland Coal			
26. TYPE ELECTRIC AND OTHER LOGS RUN CBL-GR-CCL CBL			
27. WAS WELL RECOMPLETED? no			
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8-5/8"	24#	140'	12-1/4"
5-1/2"	15.5#	1995'	7-7/8"
		CEMENTING RECORD	
		86sx "G"	
		229sx 65/35 POZ	
		150sx "B" circ to surf.	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET	
1" LP	1737'		
31. PERFORATION RECORD (Interval, size and number) 1723-32', 1737-39', 1740-46', w/4 JSPF			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
1723-46'		183,000 SCF N ₂	
		40,000# 20/40 ^{sd}	
		20,020 gal gel @ 1-5 ppg	
33. PRODUCTION			
DATE FIRST PRODUCTION 01-28-91	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) waiting on evaluation		WELL STATUS (Producing, shut-in)
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD
FLOW, TUBING PRESS.	CASING PRESSURE 147	CALCULATED 24-HOUR RATE	OIL—BBL. GAS—MCF. WATER—BBL. GAN—BBL. RATE
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
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 <u>AL Howen</u>		TITLE <u>District Superintendent</u>	
		DATE <u>5/21/91</u>	

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

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:			38. GEOLOGIC MARKERS		
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION READ, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES					
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH	
				TRUE VERT. DEPTH	
			Kirtland	720'	
			Fruitland Coal	1416'	
			Pictured Cliffs	1773'	