

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

(See other in-
structions on
reverse side)

FOR APPROVED
OMB NO. 1004-0137
Expires: December 31, 1991

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*																																	
1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>																																	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>																																	
2. NAME OF OPERATOR Amoco Production Company																																	
3. ADDRESS AND TELEPHONE NO. P.O. Box 800, Denver, Colorado 80201 (303) 830-4988																																	
4. LOCATION OF WELL. (Report location clearly and in accordance with any State requirements)* At surface 790' FNL 1120' FWL UNIT D																																	
At top prod. interval reported below																																	
At total depth																																	
14. PERMIT NO. DATE ISSUED																																	
15. DATE SPUDDED 6/12/95 16. DATE T.D. REACHED 6/17/95 17. DATE COMPL. (Ready to prod.) 9/14/95 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6106' GL 19. ELEV. CASINGHEAD																																	
20. TOTAL DEPTH, MD & TVD 4700' 21. PLUG, BACK T.D., MD & TVD 4644' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY ROTARY TOOLS YES CABLE TOOLS NO																																	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION - TOP, BOTTOM, NAME (MD AND TVD)* Mesaverde 4422-4584																																	
25. TYPE ELECTRIC AND OTHER LOGS RUN CBL, GR, CL																																	
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27. WAS WELL CORED No																																	
28. CASING RECORD (Report all strings set in well)																																	
<table border="1"><thead><tr><th>CASING SIZE/GRADE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>TOP OF CEMENT, CEMENTING RECORD</th><th>AMOUNT PULLED</th></tr></thead><tbody><tr><td>8.625" J-55</td><td>24#</td><td>43'</td><td>12.25"</td><td>Cmt to surf; 100 sx Class B</td><td></td></tr><tr><td>5.5" CF-50</td><td>14#</td><td>2401'</td><td>7.875"</td><td>340 sx Class B, cmt to surface</td><td></td></tr><tr><td>2.875" N-80</td><td>6.5#</td><td>4678'</td><td>4.75"</td><td>130 sx Class B, TOC 1266 ft</td><td></td></tr></tbody></table>										CASING SIZE/GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED	8.625" J-55	24#	43'	12.25"	Cmt to surf; 100 sx Class B		5.5" CF-50	14#	2401'	7.875"	340 sx Class B, cmt to surface		2.875" N-80	6.5#	4678'	4.75"	130 sx Class B, TOC 1266 ft	
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31. PERFORATION RECORD (Interval, size and number) See attachment																																	
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED See attachment																																	
33.* PRODUCTION																																	
DATE FIRST PRODUCTION 8/19/95 PRODUCTION METHOD (Flowing, gas lift, pumping - size and type of pump) Flowing WELL STATUS (Producing or shut-in) S/I-WAITING ON PIPLN																																	
DATE OF TEST 9/11/95 HOURS TESTED 24 CHOKE SIZE 32/64 PROD'N FOR TEST PERIOD 0 OIL - BBL. 450 GAS - MCF. 0 WATER - BBL. GAS-OIL RATIO																																	
FLOW TUBING PRESS 60 CASING PRESSURE 55 CALCULATED 24-HOUR RATE 0 OIL - BBL. 450 GAS - MCF. 0 WATER - BBL. OIL GRAVITY - API (CORR.)																																	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold TEST WITNESSED BY ACCEPTED FOR RECORD																																	
35. LIST OF ATTACHMENTS Perf and frac																																	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records SIGNED Patty Haeefele TITLE Staff Assistant																																	
* (See Instructions and Spaces for Additional Data on Reverse Side)																																	

SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

38.

GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
				Fruitland	1950'	
				Pictured Cliffs	2163'	
				Cliff House	3770'	
				Menefee	3854'	
				Point Lookout	4440'	

Begin work 8/9/95. Run CBL, GR, CL from 1680-4628 ft. TOC at 1266 ft. Pressure test casing 8200 psi, held. Perforate: 4424, 4442, 4456, 4464, 4474, 4479, 4486, 4504, 4508, 4519, 4526, 4541, 4557, 4570, 4578 with 1 JSPF, .280" diameter, 15 total shots, 2" gun size, 120 deg phasing, 7 gms. Acidize 4424-4578 ft with 2 bbls hydrochloric acid, max pressure 4750 psi, max rate 7.1 bpm. Balled off well with good ball action.

Frac 4424-4578 ft with 199,184 lbs 16/30 sand; 1,419,038 scf; gel strength 30, 65%, 67%, & 70% foam quality. Max pressure 7285 psi. Max rate 29.0 bpm. Flow well. Tag sand at 3910 ft. Clean out sand 3910-4628 ft with N2. Flow well. CP 100 psi. Tag at 4431', 192 ft of fill in well. Cleanout sand 4431-4623 with nitrogen.

Re-perforate MV interval: 4576-4584, 4568-4572, 4556-4558, 4438-4550, 4422-4426 with 2 JSPF, diameter .280", 260 total shots fired, gun size 2", phasing 180 deg, 7.5 gms. Flow well. Tag at 4576 ft. Cleanout 4574-4668 ft - 94 ft fill. Landed 1.25" tubing at 4530 ft. Finish work 9/14/95.

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised October 18, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Amoco Production Company P.O. Box 800 Denver, CO 80201		² OGRID Number 000778
		³ Reason for Filing Code NW
⁴ API Number 30 - 0 45-25249	⁵ Pool Name Blanco Mesaverde	⁶ Pool Code 72319
⁷ Property Code 327	⁸ Property Name Bolack C LS	⁹ Well Number 11A

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
D	28	27N	8W		790	North	1120	West	San Juan

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Lse Code F	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
007057	El Paso Natural Gas P.O. Box 1336 El Paso, TX 79901	2816044	G	

IV. Produced Water

²³ POD 2816045	²⁴ POD ULSTR Location and Description OIL CORRELATION DIST. 3
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V. Well Completion Data

²⁵ Spud Date 6/12/95	²⁶ Ready Date 9/14/95	²⁷ TD 4700'	²⁸ PBTD 4644	²⁹ Perforations 4422-4584	³⁰ DIHC, DC, MC
³¹ Hole Size	³² Casing & Tubing Size	³³ Depth Set	³⁴ Sacks Cement		
12.25"	8.625"	43'	100 sx Class B		
7.875"	5.5"	2401'	340 sx Class B		
4.75"	2.875"	4678'	130 sx Class B		
	1.25"	4530'			

VI. Well Test Data

³⁵ Date New Oil	³⁶ Gas Delivery Date	³⁷ Test Date 9/11/95	³⁸ Test Length 24 hrs	³⁹ Tbg. Pressure 60	⁴⁰ Csg. Pressure 55
⁴¹ Choke Size 32/64	⁴² Oil 0	⁴³ Water 0	⁴⁴ Gas 450	⁴⁵ AOF	⁴⁶ Test Method F

⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

Title:

Date:

Patty Haefele

Patty Haefele

Staff Assistant

9/20/95

Phone: (303) 830-4988

OIL CONSERVATION DIVISION

Approved by:

Original Signed by FRANK T. CHAVEZ

Title:

SUPERVISOR DISTRICT # 3

Approval Date:

SEP 27 1995

⁴⁸ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°.
Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

31. Inside diameter of the well bore
32. Outside diameter of the casing and tubing
33. Depth of casing and tubing. If a casing liner show top and bottom.
34. Number of sacks of cement used per casing string

If the following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

35. MO/DA/YR that new oil was first produced
36. MO/DA/YR that gas was first produced into a pipeline
37. MO/DA/YR that the following test was completed
38. Length in hours of the test
39. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells
40. Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells
41. Diameter of the choke used in the test
42. Barrels of oil produced during the test
43. Barrels of water produced during the test
44. MCF of gas produced during the test
45. Gas well calculated absolute open flow in MCF/D

46. The method used to test the well:
F Flowing
P Pumping
S Swabbing
If other method please write it in.

47. The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report

48. The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person

1. Operator's name and address
2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
3. Reason for filing code from the following table:
NW New Well
RC Recompletion
CH Change of Operator (Include the effective date.)
AO Add oil/condensate transporter
CO Change oil/condensate transporter
AG Add gas transporter
CG Change gas transporter
RT Request for test allowable (Include volume requested)
If for any other reason write that reason in this box.
4. The API number of this well
5. The name of the pool for this completion
6. The pool code for this pool
7. The property code for this completion
8. The property name (well name) for this completion
9. The well number for this completion
10. The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.
11. The bottom hole location of this completion
12. Lease code from the following table:
F Federal
S State
P Fee
J Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe
13. The producing method code from the following table:
F Flowing
P Pumping or other artificial lift
14. MO/DA/YR that this completion was first connected to a gas transporter
15. The permit number from the District approved C-129 for this completion
16. MO/DA/YR of the C-129 approval for this completion
17. MO/DA/YR of the expiration of C-129 approval for this completion
18. The gas or oil transporter's OGRID number
19. Name and address of the transporter of the product
20. The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
21. Product code from the following table:
O Oil
G Gas
22. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", etc.)
23. The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
24. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.)
25. MO/DA/YR drilling commenced
26. MO/DA/YR this completion was ready to produce
27. Total vertical depth of the well
28. Plugback vertical depth
29. Top and bottom perforation in this completion or casing shoe and TD if openhole
30. Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore.