Form 9-330
(Rev. 5-63)

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*

5. LEASE DESIGNATION AND SERIAL NO.: SF 078673

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: None

7. UNIT AGREEMENT NAME: -

8. FARM OR LEASE NAME: Schlosser Federal WN

9. WELL NO.: 8

10. FIELD AND POOL, OR WILDCAT: Basin Dakota

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: Sec. ~~[illegible]~~ 27-28N-11W N.M.P.M.

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: SINCLAIR OIL & GAS COMPANY

3. ADDRESS OF OPERATOR: 601 Denver Club Building Denver, Colorado

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface: 910' from the South line and 935' from the West line, Sec. 27-28N-11W, San Juan County, New Mexico
At top prod. interval reported below: Same
At total depth: Same

14. PERMIT NO.: Mr. P. T. McGrath
DATE ISSUED: 12-1-64

12. COUNTY OR PARISH: SAN JUAN
13. STATE: NEW MEXICO

15. DATE SPUDDED: 12-2-64
16. DATE T.D. REACHED: 12-12-64
17. DATE COMPL. (Ready to prod.): 12-21-64
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*: 5784' GL
19. ELEV. CASINGHEAD: 5784' GL

20. TOTAL DEPTH, MD & TVD: 6365'
21. PLUG BACK T.D., MD & TVD: 6329'
22. IF MULTIPLE COMPL., HOW MANY*:
23. INTERVALS DRILLED BY: ROTARY TOOLS: 0 - 6365' CABLE TOOLS: None

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*:
6163-6240 Graneros
6240-6365 Dakota

25. WAS DIRECTIONAL SURVEY MADE: No

26. TYPE ELECTRIC AND OTHER LOGS RUN: I-ES, GR Density, GR-Correlation, Cmt Top Log

27. WAS WELL CORED: No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24#	359	12-1/4	240 sx	None
4-1/2"	10.5#	6363'	7-7/8"	1st Stage 400 Sx 2nd Stage 1000 Sx	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
None				

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8"	6177'	None

31. PERFORATION RECORD (Interval, size and number)
Dakota 6243-52' & 6258-92' w/2/ft.
Graneros 6189-6201 w/2/ft.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6243-52' & 6256-92'	Dakota w/60,000# sd, 69000 gal wtr. 1%CACL 25#/1000 gal J-101
6189-6201'	Graneros 15,000# sd, 20,000 gal CaCl wtr & J-101 jel

33.* PRODUCTION

DATE FIRST PRODUCTION: SI waiting on conn.
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump): Flowing
WELL STATUS (Producing or shut-in): Shut in Waiting on conn.

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
12-21-64	18-1/2	3/4"	→	None	4,640 MCFPD	None	None

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
450#	1200#	→	None	4,640 MCFPD	None	None

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.): SI Waiting on Connection To be sold to El Paso Natural Gas Co.
TEST WITNESSED BY: Mr. J. E.

35. LIST OF ATTACHMENTS: 2 Each of logs listed in No. 26. 5 - (No. 37) Summary of Porous Zones

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OIL CON. COM.
DIST. 3

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

SIGNED: TITLE: Senior Clerk DATE:

*(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:
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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
SEE ATTACHED SHEET			

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH

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