

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions 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-079244	
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 Amoco Production Company				7. UNIT AGREEMENT NAME Gallegos Canyon Unit	
3. ADDRESS OF OPERATOR 501 Airport Drive Farmington, NM 87401				8. FARM OR LEASE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990' FNL X 1540' FWL section 20, T28N, R12W At top prod. interval reported below same At total depth same				9. WELL NO. 227E	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Basin Dakota	
15. DATE SPUDDED 2-23-80				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA NE/4, NW/4 Section 20, T28N, R12W	
16. DATE T.D. REACHED 3-2-80				12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 7-12-80				13. STATE NM	
18. ELEVATIONS (DF, RSB, RT, GR, ETC.)* 5578' GL				19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 6187'		21. PLUG, BACK T.D., MD & TVD 6146'		22. IF MULTIPLE COMPL., HOW MANY* _____	
23. INTERVALS DRILLED BY 0-TD				24. ROTARY TOOLS	
25. CABLE TOOLS				26. WAS DIRECTIONAL SURVEY MADE No	
27. WAS WELL CORED No				28. CASING RECORD (Report all strings set in well)	
Casing Size		Weight, lb./ft.		Depth Set (MD)	
8-5/8"		24#		326'	
4-1/2"		11.6#		6171'	
Hole Size		Cementing Record		Amount Pumps	
12-1/4"		315 sx		None	
7-7/8"		1320 sx		None	
29. LINER RECORD				30. TUBING RECORD	
Size		Top (MD)		Bottom (MD)	
Sacks Cement*		Screen (MD)		Size	
2-3/8"		6103'		Packer Set (MD)	
None					
31. PERFORATION RECORD (Interval, size and number) 5902-5916', 5988-6032', with 2 spf, a total of 116, .38" holes.				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
Depth Interval (MD)		Amount and Kind of Material Used			
5902-6032		95,400 gal of frac fluid X			
		131,250# of 20-40 sand			
33.* PRODUCTION					
Date First Production		Production Method (Flowing, gas lift, pumping—size and type of pump) Flowing		Well Status (Producing or shut-in) SI	
Date of Test		Hours Tested		Choke Size	
7-23-80		3 hours		.75	
Flow. Tubing Press.		Casing Pressure		Calculated 24-Hour Rate	
134 psig		688 psig		1698	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) to be sold				TEST WITNESSED BY	
35. LIST OF ATTACHMENTS					
36. I hereby certify that the foregoing and attached information is complete and correct as determined by available records					
SIGNED E E SVOBODA		TITLE Dist. Adm. Supvr		DATE 8-12-80	

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

NMOC

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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Picture Cliff	1324	1342	Shaley sand			
Lewis Shale	1342	2935	Shale			
Mesaverde	2935	4110	Shaley sand			
Mancos Shale	4110	5076	Shale			
Callup	5076	5358	Shaley sand			
Mancos Shale	5358	5808	Shale			
Greenhorn	5808	5858	Limestone			
Craneros Shale	5858	5902	Shale			
Craneros Dakota	5902	5916	Shaley sand			
Main Dakota	5988	6032	Shaley sand			