

2-Phillips (Corbett, Cullender)
1-EPNG (Cnfield)
1-Comm. of Pub. Lands
1-IDH, 1-TCA
1-T. Cowan
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.

5. LEASE DESIGNATION AND SERIAL NO.

SF-078278

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

San Juan 29-6

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

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

13 - 29N - 6W

12. COUNTY OR
PARISH

Rio Arriba

13. STATE

New Mexico

19. ELEV. CASINGHEAD

ROTARY TOOLS

0-8110'

CABLE TOOLS

25. WAS DIRECTIONAL
SURVEY MADE

Yes

27. WAS WELL CORED

No

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

Beta Development Co.

3. ADDRESS OF OPERATOR

234 Petr. Club Plaza, Farmington, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

890/FSL 890/FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR
PARISH

13. STATE

Rio Arriba

New Mexico

19. ELEV. CASINGHEAD

ROTARY TOOLS

0-8110'

CABLE TOOLS

25. WAS DIRECTIONAL
SURVEY MADE

Yes

27. WAS WELL CORED

No

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

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

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

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

29. LINER RECORD 30. TUBING RECORD

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

33. PRODUCTION 34. DISPOSITION OF GAS (Some 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

37. SIGNATURE OF OPERATOR 38. TITLE 39. DATE

40. SIGNATURE OF WITNESS 41. TITLE 42. DATE

43. SIGNATURE OF WITNESS 44. TITLE 45. DATE

46. SIGNATURE OF WITNESS 47. TITLE 48. DATE

49. SIGNATURE OF WITNESS 50. TITLE 51. DATE

52. SIGNATURE OF WITNESS 53. TITLE 54. DATE

55. SIGNATURE OF WITNESS 56. TITLE 57. DATE

58. SIGNATURE OF WITNESS 59. TITLE 60. DATE

61. SIGNATURE OF WITNESS 62. TITLE 63. DATE

64. SIGNATURE OF WITNESS 65. TITLE 66. DATE

67. SIGNATURE OF WITNESS 68. TITLE 69. DATE

70. SIGNATURE OF WITNESS 71. TITLE 72. DATE

73. SIGNATURE OF WITNESS 74. TITLE 75. DATE

76. SIGNATURE OF WITNESS 77. TITLE 78. DATE

79. SIGNATURE OF WITNESS 80. TITLE 81. DATE

82. SIGNATURE OF WITNESS 83. TITLE 84. DATE

85. SIGNATURE OF WITNESS 86. TITLE 87. DATE

88. SIGNATURE OF WITNESS 89. TITLE 90. DATE

91. SIGNATURE OF WITNESS 92. TITLE 93. DATE

94. SIGNATURE OF WITNESS 95. TITLE 96. DATE

97. SIGNATURE OF WITNESS 98. TITLE 99. DATE

100. SIGNATURE OF WITNESS 101. TITLE 102. DATE

103. SIGNATURE OF WITNESS 104. TITLE 105. DATE

106. SIGNATURE OF WITNESS 107. TITLE 108. DATE

109. SIGNATURE OF WITNESS 110. TITLE 111. DATE

112. SIGNATURE OF WITNESS 113. TITLE 114. DATE

115. SIGNATURE OF WITNESS 116. TITLE 117. DATE

118. SIGNATURE OF WITNESS 119. TITLE 120. DATE

121. SIGNATURE OF WITNESS 122. TITLE 123. DATE

124. SIGNATURE OF WITNESS 125. TITLE 126. DATE

127. SIGNATURE OF WITNESS 128. TITLE 129. DATE

130. SIGNATURE OF WITNESS 131. TITLE 132. DATE

133. SIGNATURE OF WITNESS 134. TITLE 135. DATE

136. SIGNATURE OF WITNESS 137. TITLE 138. DATE

139. SIGNATURE OF WITNESS 140. TITLE 141. DATE

142. SIGNATURE OF WITNESS 143. TITLE 144. DATE

145. SIGNATURE OF WITNESS 146. TITLE 147. DATE

148. SIGNATURE OF WITNESS 149. TITLE 150. DATE

151. SIGNATURE OF WITNESS 152. TITLE 153. DATE

154. SIGNATURE OF WITNESS 155. TITLE 156. DATE

157. SIGNATURE OF WITNESS 158. TITLE 159. DATE

160. SIGNATURE OF WITNESS 161. TITLE 162. DATE

163. SIGNATURE OF WITNESS 164. TITLE 165. DATE

166. SIGNATURE OF WITNESS 167. TITLE 168. DATE

169. SIGNATURE OF WITNESS 170. TITLE 171. DATE

172. SIGNATURE OF WITNESS 173. TITLE 174. DATE

175. SIGNATURE OF WITNESS 176. TITLE 177. DATE

178. SIGNATURE OF WITNESS 179. TITLE 180. DATE

181. SIGNATURE OF WITNESS 182. TITLE 183. DATE

184. SIGNATURE OF WITNESS 185. TITLE 186. DATE

187. SIGNATURE OF WITNESS 188. TITLE 189. DATE

190. SIGNATURE OF WITNESS 191. TITLE 192. DATE

193. SIGNATURE OF WITNESS 194. TITLE 195. DATE

196. SIGNATURE OF WITNESS 197. TITLE 198. DATE

199. SIGNATURE OF WITNESS 200. TITLE 201. 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			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP TRUB. VERT. DEPTH
Kirtland	2972					
Fruitland	3306					
Pictured Cliffs	3606					
Lewis	3691					
Cliff House	3445					
Menefee	5525					
Point Lookout	5811					
Marcos	5933					
Gallup	6862					
Greenhorn	7790					
Grandpas Shale	7843					
Grandpas Sand	7924					
Dakota "A"	7982					
Dakota "B"	8032					