

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 _____						7. UNIT AGREEMENT NAME	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____						8. FARM OR LEASE NAME Hamber	
2. NAME OF OPERATOR Tenneco Oil Company						9. WELL NO. 6	
3. ADDRESS OF OPERATOR P. O. Box 1714 - Durango, Colorado						10. FIELD AND POOL, OR WILDCAT Blanco Pictured Cliffs	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1190' FSL, 1850' FEL Unit "0" At top prod. interval reported below At total depth						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec 20, T-29-N, R-9-W	
				14. PERMIT NO.	DATE ISSUED		
15. DATE SPUDDED 5-11-66		16. DATE T.D. REACHED 5-14-66		17. DATE COMPL. (Ready to prod.) 6-14-66		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5696' GR	
20. TOTAL DEPTH, MD & TVD 2268'		21. PLUG, BACK T.D., MD & TVD 2162'		22. IF MULTIPLE COMPL., HOW MANY* ---		23. INTERVALS DRILLED BY →	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2110 - 2162						19. ELEV. CASINGHEAD 5696'	
25. WAS DIRECTIONAL SURVEY MADE Yes						26. WAS WELL CORED No	
26. TYPE ELECTRIC AND OTHER LOGS RUN IES							
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		MOUNT PULLED	
8-5/8	20#	123	12-1/4"	100 sacks		JUL 1 1966	
3-1/2	9.2#	2266	7-7/8"	275 Sacks		OIL CON. COM. DIST. 3	
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
		None				None	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
2110-18		1 HPF		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
2126-30		1 HPF		2110-2162		45,000 gals wtr & 45,000 lbs. sand	
2144-52		1 HPF					
2158-62		1 HPT					
33.* PRODUCTION							
DATE FIRST PRODUCTION 8.1.		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) 8.1.	
DATE OF TEST 6-14-66	HOURS TESTED 3	CHOKE SIZE 3/4	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS. 23	CASING PRESSURE ---	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF. 417	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST JURISSED BY JUN 30 1966	
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 Harold C. Nichols				TITLE Senior Production Clerk		DATE June 28, 1966	

Distribution:

5 - USOS

1 - Continental

***(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.¹ 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 83, 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 each 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.
Pictured Cliffs	2110	2162	Band - Gas