

[illegible]

Santa Fe, New Mexico

WELL RECORD

Mail to District Office, Oil Conservation Commission, to which Form C-101 was sent not later than twenty days after completion of well. Follow instructions in Rules and Regulations of the Commission. Submit in QUINTUPPLICATE.

AREA 640 ACRES
LOCATE WELL CORRECTLY

.....
(Company or Operator)

Edward Y. Olsen, Sole Agent
(Lease)

Well No. 2, in 1 52 1/4 of 12 1/4, of Sec. 23, T. 29, R. 13, NMPM.

Pool, ~~San Juan~~ County.

Well is 1650 feet from North line and 990 feet from East line.

of Section 23 If State Land the Oil and Gas Lease No. is.....

Drilling Commenced November 15, 1952 Drilling was Completed April, 1953

Name of Drilling Contractor..... Floyd West, Farmington, New Mexico

Address.....

Elevation above sea level at Top of Tubing Head..... The information given is to be kept confidential until
..... 19.....

No. 1, from 327 to 359 No. 4, from 1147 to 1152

No. 2, from 67 to 100 No. 5, from _____ to _____

No. 3, from _____ to _____ No. 6, from _____ to _____

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from 20 to 50 feet.

No. 2, from 330 to 100 feet.

No. 3, from 1373 to 1119 feet.

No. 4, from 1150 to 1100 feet.

SIZE	WEIGHT PER FOOT	NEW OR USED	AMOUNT	KIND OF SHOE	CUT AND PULLED FROM	PERFORATIONS	PURPOSE
10 1/2	45	used	60	plain			surface
9 5/8	560	used	560	plain	560		stiff
7	20	used	1950	plain	1950		stiff
5	13	new	1117.3	plain	805		protection

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO. SACKS OF CEMENT	METHOD USED	MUD GRAVITY	AMOUNT OF MUD USED
	12 3/4	60	12	Drop		
7	5 1/2	117.0	50	addition		

RECORD OF PRODUCTION AND STIMULATION

(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)

~~T. 1000 ft. to 1000 ft. turned back from 1100 to 1150 to a bit off water (salt)~~

with salinization, and very small section just below shore marking approx 30 ft. to water. Not commercial.

Result of Production Stimulation.....

..Depth Cleaned Out

RECORD OF DRILL-STEM AND SPECIAL TESTS

If drill-stem or other special tests or deviation surveys were made, submit report on separate sheet and attach hereto

TOOLS USED

Rotary tools were used from.....feet to.....feet, and from.....feet to.....feet.
Cable tools were used from.....feet to.....feet, and from.....feet to.....feet.

PRODUCTION

Put to Producing....., 19.....

OIL WELL: The production during the first 24 hours was.....barrels of liquid of which.....% was
was oil;% was emulsion;% water; and.....% was sediment. A.P.I.
Gravity.....

GAS WELL: The production during the first 24 hours was.....M.C.F. plus.....barrels of
liquid Hydrocarbon. Shut in Pressure.....lbs.
Length of Time Shut in.....

PLEASE INDICATE BELOW FORMATION TOPS (IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE):

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy.....	T. Devonian.....	T. Ojo Alamo.....	
T. Salt.....	T. Silurian.....	T. Kirtland-Fruitland.....	
B. Salt.....	T. Montoya.....	T. Farmington.....	
T. Yates.....	T. Simpson.....	T. Pictured Cliffs.....	1117 (1153)
T. 7 Rivers.....	T. McKee.....	T. Menefee.....	
T. Queen.....	T. Ellenburger.....	T. Point Lookout.....	
T. Grayburg.....	T. Gr. Wash.....	T. Mancos.....	
T. San Andres.....	T. Granite.....	T. Dakota.....	
T. Glorieta.....	T.	T. Morrison.....	
T. Drinkard.....	T.	T. Penn.....	
T. Tubbs.....	T.	T.	
T. Abo.....	T.	T.	
T. Penn.....	T.	T.	
T. Miss.....	T.	T.	

FORMATION RECORD

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	21		fill and gravel				
21	50		scale				
50	327		scale with sand streaks				
327	400		sand with no sand in it				
400	490		hard scale				
490	567		scale				
567	590		sand (fine) no water				
590	1073		scale				
1073	1110		coal with scale streaks (water)				
1110	1112		gas blow out at 1112, leaked hole				
1112	1115		coal with scale				
1115	1150		hard				
5 1/2 casing cemented at 1117.2. results of test in well very similar to the Cyclops No. 2.							

OIL CONSERVATION COMMISSION
AZTEC DISTRICT OFFICE
NO. 6
DISTRIBUTION
NO. FURNISHED
Operator
Santa Fe
Exploration Office
State Land Office
U. S. G. S.
Transporter
File

ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED

I hereby swear or affirm that the information given herewith is a complete and correct record of the well and all work done on it so far
as can be determined from available records.

Company or Operator..... Address.....
Name..... Position or Title.....
(Date).....