

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. SF080000A	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESRV. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR General Petroleum Corp.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 234, Farmington, N.M.		8. FARM OR LEASE NAME Rock Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations) At surface 1850' FNI 810' FWI At top prod. interval reported below At total depth		9. WELL NO. 2	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Basin DR.	
DATE ISSUED JUN 22 1967		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec 24, T29N, R9W	
OIL CON. COM. DIST. 3		12. COUNTY OR PARISH SAN JUAN	
15. DATE SPUDDED 3-1-67		13. STATE N.M.	
16. DATE T.D. REACHED 3-13-67		18. ELEV. CASINGHEAD	
17. DATE COMPL. (Ready to prod.) 4-1-67		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 7200		21. PLUG, BACK T.D., MD & TVD 7189	
22. IF MULTIPLE COMPL., HOW MANY? Single		23. INTERVALS DRILLED BY 0-T.D.	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) 6900 to 7170 Dakota		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction, Formation Density & Gamma Ray		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	CEMENTING RECORD
10 3/4	32.75	197	150
7 5/8	24.0	2905	275
4 1/2	10.5 + 1/16	7200	785 C. J.
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
		None	
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
1 1/4	7088		
31. PERFORATION RECORD (Interval, size and number)			
6900-62, 6902-10, 6986-88, 6994-9, 7042-44, 7060-62, 7085-87, 7092-94, 7106-68, 7119-21, 7142-44, 7155-57, 7182-70			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED		
6900-7170	50,000 #20-100 mesh		
	101,000 gal water w/ 2 1/2 #		
	3400 gal 1000 psi		
33. PRODUCTION			
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, plugging—size and type of pump)		WELL STATUS (Producing or shut-in)
	Flowing		Shut In
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. P. TEST PERIOD
4-18-67	3 hrs	3/4"	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.
52	721		739
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
Shut in			
35. LIST OF ATTACHMENTS			
CAOF 840 MCF			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED	TITLE		DATE
2. H. Duggan	Superintendent		6-20-67

* (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: "Gacks 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 INTERVAL ZONES:			38. GEOLOGIC MARKERS		
FORMATION	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			Log	4190	
			C.I.P.P. House	4345	
			Mencos	4745	
			Pl. Louder	4910	
			Mencos	5305	
			Gallup	6785	
			Greenhorn	6855	
			Greenhorn	6985	
			Dolomite		