

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. 076934	
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 TEBECO OIL COMPANY		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. BOX 1714, DURANGO, COLORADO		8. FARM OR LEASE NAME Flarence	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface At top prod. interval reported below At total depth		9. WELL NO. 10	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 7/14/65		16. DATE T.D. REACHED 8/1/65	
17. DATE COMPL. (Ready to prod.) 8/7/65		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6126 DF	
19. ELEV. CASINGHEAD 6126		20. TOTAL DEPTH, MD & TVD 7412	
21. PLUG, BACK T.D., MD & TVD 5253		22. IF MULTIPLE COMPL., HOW MANY* ---	
23. INTERVALS DRILLED BY 4700-7412		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4893-5100 4398-4777	
25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electrolog, Gamma Ray Density	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. CEMENTING RECORD	
31. PERFORATION RECORD (Interval, size and number) 4893-5100 w/2 jpf 4398-4777 w/2 jpf		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 4893-5100 4398-4777 4893-5100 4398-4777 AMOUNT AND KIND OF MATERIAL USED 100,800 gal wtr, 80,000 lbs sd 104,000 gal wtr, 80,000 lbs sd 1100 gal acid 5800 gal acid	
33.* DATE FIRST PRODUCTION 8/7/65		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
DATE OF TEST 9/8/65		WELL STATUS (Producing or shut-in) Producing	
HOURS TESTED 24		CHOKE SIZE Open	
PROD'N. FOR TEST PERIOD ---		OIL—BBL. ---	
GAS—MCF. 479		WATER—BBL. ---	
GAS-OIL RATIO ---		FLOW. TUBING PRESS. 492	
CASING PRESSURE 746		CALCULATED 24-HOUR RATE ---	
OIL—BBL. ---		GAS—MCF. ---	
WATER—BBL. ---		GAS-OIL RATIO ---	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold - State Deliverability Test		35. LIST OF ATTACHMENTS None	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available data. Original Signed by HAROLD C. NICHOLS		TEST WITNESSED BY NOV 10 1965	
SIGNED Harold C. Nichols		TITLE Sr. Production Clerk	
DATE November 1, 1965		U. S. GEOLOGICAL SURVEY WASHINGTON, D. C.	

*(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 38, 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 on 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 additional details of any multiple stage cementing and the location of the cementing tool.

Item 29: "Sacks Cement": Attached supplemental records for this well should show 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 zone 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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE WERT. DEPTH
Messaverde	4398	5100	8d, Gas			
Bakota	7119	7390	8d, Gas			