

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 *

5. LEASE DESIGNATION AND SERIAL NO.

SP-081299

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

L. O. Kelly

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA34/4 34/4 Section 3,
T-30-N, R-12-W12. COUNTY OR
PARISH

San Juan

13. STATE

New Mexico

19. ELEV. CASINGHEAD

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

5874 (RKB)

23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0-6800

25. WAS DIRECTIONAL
SURVEY MADE

No

27. WAS WELL CORED

No

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

PAN AMERICAN PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR

P. O. Box 480, Farmington, New Mexico

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

At surface

1095 FSL and 975 FSL

At top prod. interval reported below

At total depth

Same

14. PERMIT NO.

DATE ISSUED

15. DATE SPUNDED

7-1-64

16. DATE T.D. REACHED

7-14-64

17. DATE COMPL. (Ready to prod.)

7-27-64

20. TOTAL DEPTH, MD & TVD

6800

21. PLUG, BACK T.D., MD & TVD

6764

22. IF MULTIPLE COMPL.,
HOW MANY*

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Graneros Dakota

Main Dakota

6634-6680

6680-6760

26. TYPE ELECTRIC AND OTHER LOGS RUN

Induction Electric and Gamma Ray Sonic

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24.5	351	12-1/4"	200 Sacks	None
4-1/2"	10.5	6800	7-7/8"	1100 Sacks	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	6679	

31. PERFORATION RECORD (Interval, size and number)

6724-34 with 4 shots per foot
6686-98 with 4 shots per foot
6636-46 with 4 shots per foot

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6724-34	15,300 gal. wt. & 11,000# sand
6686-98	28,500 gal. wt. & 23,000# sand
6636-46	23,740 gal. wt. & 20,000# sand

33.*

PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in)

DATE OF TEST	HOURS TESTED	CHOKE SIZE	Flow FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
7-27-64	3	3/4"	→				
FLOWING PRESS.	CASING PRESSURE	TESTED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY API (CORR.)	
125	600	→					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

35. To be sold to El Paso Natural Gas Company

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.

SIGNED Fred L. Hollingsworth, Engineer

F. L. HOLLINGSWORTH

TITLE

AUG 21 1964

CON. COM.

PT. 3

DATE August 12, 1964

* (See Instructions and Spaces for Additional Data on Reverse Side)

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.

Notations and Trademark should be described in accordance with Federal requirements. Consult local State 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 or Indian land ownership requirements. If there are specific instructions, or Federal office for specific instructions, provide them in this form and in any attachments.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in outer 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 38. 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.)

DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

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