

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-B355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. 077833	
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 Tennessee Oil Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 1714 - Durango, Colorado		8. FARM OR LEASE NAME Florance	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 865' FRL, 1565' FRL Unit B At top prod. interval reported below At total depth Same		9. WELL NO. FLY	
10. FIELD AND POOL, OR WILDCAT Florance Pictured Cliffs		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 20, T-30-N, R-9-W	
14. PERMIT NO.		DATE ISSUED MAY 10 1966	
15. DATE SPUNDED 3-14-66		16. DATE T.D. REACHED 3-19-66	
17. DATE COMPL. (Ready to prod.) 3-24-66		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6018' GR	
19. ELEV. CASINGHEAD 6018'		20. TOTAL DEPTH, MD & TVD 2840	
21. PLUG, BACK T.D., MD & TVD 2767		22. IF MULTIPLE COMPL., HOW MANY* ---	
23. INTERVALS DRILLED BY 0 - 2840		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2721 - 2737 Pictured Cliffs	
25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN None	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
CASING SIZE 8-5/8" 3-1/2"		WEIGHT, LB./FT. 24# 7.7#	
DEPTH SET (MD) 205 2837		HOLE SIZE 12-1/4 7-7/8	
CEMENTING RECORD 150 Sacks 930 Sacks		AMOUNT PULLED None	
29. LINER RECORD		30. TUBING RECORD	
SIZE None		SIZE None	
TOP (MD) None		DEPTH SET (MD) None	
BOTTOM (MD) None		PACKER SET (MD)	
SACKS CEMENT* None		SCREEN (MD)	
31. PERFORATION RECORD (Interval, size and number) 2721 - 2737 24 holes		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 2721 - 2737 AMOUNT AND KIND OF MATERIAL USED 30,000 lbs sand & 30,000 gals. Wt.	
33.* PRODUCTION			
DATE FIRST PRODUCTION Shut-In		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Shut-In		DATE OF TEST 4-2-66	
HOURS TESTED 3 hours		CHOKE SIZE 3/4	
PROD'N. FOR TEST PERIOD ---		OIL—BBL. ---	
GAS—MCF. ---		WATER—BBL. ---	
GAS-OIL RATIO ---		OIL GRAVITY-API (CORR.) ---	
FLOW. TUBING PRESS. 294		CASING PRESSURE ---	
CALCULATED 24-HOUR RATE ---		OIL—BBL. ---	
GAS—MCF. ---		WATER—BBL. ---	
OIL GRAVITY-API (CORR.) ---		TEST WITNESSED BY ---	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Shut-In			
35. LIST OF ATTACHMENTS None			
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 5-6-66		DATE 5-6-66	

*(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 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 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.)

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 VERT. DEPTH
Fractured Cliffs	2721'	2737'	Sand - Gas			