

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 ☐				RECEIVED SEP 14 1966 U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐							
2. NAME OF OPERATOR Tennessee Oil Company							
3. ADDRESS OF OPERATOR P. O. Box 1714, Durango, Colorado							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 915 FEL 1070 FEL Unit P At top prod. interval reported below At total depth							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUNDED 7/10/66		16. DATE T.D. REACHED 7/12/66		17. DATE COMPL. (Ready to prod.) 8/12/66		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3967' Gr.	
19. ELEV. CASING HEAD 3967		20. TOTAL DEPTH, MD & TVD 2732		21. PLUG, BACK T.D., MD & TVD 2704		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY 0 - 2732		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2564 - 2604 Pictured Cliffs		25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN GR. Density	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 5/8"		20 & 24		127		12 1/4	
3 1/2"		9.25		2733		7 7/8	
CEMENTING RECORD		AMOUNT PULLED					
100 ex							
275 ex							
29. LINER RECORD				30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		SCREEN (MD)	
SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)	
						None	
PACKER SET (MD)							
31. PERFORATION RECORD (Interval, size and number) 2564 - 70 2 HPT 2584 - 92 1 HPT 2600 - 04 1 HPT				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 2564 - 2604 AMOUNT AND KIND OF MATERIAL USED 30,000 gal vtr., 30,000 lb sand			
33. PRODUCTION							
DATE FIRST PRODUCTION Start in		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or Shut in)	
DATE OF TEST 8/12/66		HOURS TESTED 3		CHOKE SIZE 3/4"		PROD'N. FOR TEST PERIOD 1985	
OIL—BBL.		GAS—MCF.		WATER—BBL.		OIL GRAVITY-API (CORR.)	
FLOW. TUBING PRESS.		CASING PRESSURE 149		CALCULATED 24-HOUR RATE 1985		TEST WITNESSED BY OIL CON. DIST.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							
35. LIST OF ATTACHMENTS							
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 9/14/66			

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

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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 85.

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 clay	2564	2604	Sand - Gas			