

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. SF 078116	
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 Tenneco Oil Company				7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 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 990' FNL 815' FEL At top prod. interval reported below Same At total depth Same				9. WELL NO. 51X	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Blanco P.C.	
15. DATE SPUDDED 9-7-65				11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 20, T30N, R9W	
16. DATE T.D. REACHED 9-16-65				12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 9-16-65				13. STATE N.M.	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6001 GR				19. ELEV. CASINGHEAD 6001	
20. TOTAL DEPTH, MD & TVD 2786		21. PLUG, BACK T.D., MD & TVD ---		22. IF MULTIPLE COMPL., HOW MANY* --	
23. INTERVALS DRILLED BY 0-2786				24. ROTARY TOOLS 0	
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		Weight, lb./ft. 24#		Depth Set (MD) 108	
Hole Size 12-1/4		Amount Pulled none		29. LINER RECORD	
Size NONE		Top (MD) NONE		Bottom (MD) NONE	
Sacks Cement* NONE		Screen (MD) NONE		30. TUBING RECORD	
Size NONE		Depth Set (MD) NONE		Packer Set (MD) NONE	
31. PERFORATION RECORD (Interval, size and number) Dry hole - plugged with 4135 cu ft cement thru perfs at 2196 in Drill Pipe. Drill pipe and collars cemented in hole at 2786 TD. Junked hole.				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33.* PRODUCTION				34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Dry hole	
DATE FIRST PRODUCTION Dry		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Dry		WELL STATUS (Producing or shut-in) Dry	
DATE OF TEST --		HOURS TESTED --		CHOKE SIZE --	
PROD'N. FOR TEST PERIOD --		OIL—BBL. --		GAS—MCF. --	
WATER—BBL. --		GAS—OIL RATIO --		OIL GRAVITY-API (CORR.) --	
FLOW. TUBING PRESS. --		CASING PRESSURE --		CALCULATED 24-HOUR RATE --	
OIL—BBL. --		GAS—MCF. --		WATER—BBL. --	
OIL GRAVITY-API (CORR.) --		TEST WITNESSED BY OC 7 1965		U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.	
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 Original Signed By HAROLD C. NICHOLS SIGNED H. C. Nichols		TITLE Senior Production Clerk DATE 10-4-65	

*(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 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			38. GEOLOGIC MARKERS				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
			Hole was lost before any zones of significant contents and porosity were penetrated.				