

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions 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 _____				
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____		
2. NAME OF OPERATOR Claude C. Kennedy									
3. ADDRESS OF OPERATOR 1249 Chico Ave., Farmington, N. Mexico 9401									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2900'el, 20'el At top prod. interval reported below 1200' At total depth Same									
14. PERMIT NO.				DATE ISSUED					
15. DATE SPUDDED -2-1969		16. DATE T.D. REACHED 2-26-1969		17. DATE COMPL. (Ready to prod.) 3-1-1969		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 2066		19. ELEV. CASINGHEAD 5007	
20. TOTAL DEPTH, MD & TVD 159		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 55-859		24. WAS DIRECTIONAL SURVEY MADE No	
25. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* One hole 122-859 Dakota								26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Resistivity	
27. WAS WELL CORED No									
28. CASING RECORD (Report all strings set in well)									
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED			
5	20	75	9	15 SACKS					
4 1/2	11.00	152	5-5/8	25 SACKS					
29. LINER RECORD									
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD				
					SIZE	DEPTH SET (MD)	PACKER SET (MD)		
					2-3/8	344			
31. PERFORATION RECORD (Interval, size and number)									
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.									
DEPTH INTERVAL (MD)									
KIND OF MATERIAL USED									
MAR 3 1969									
33.* PRODUCTION									
DATE FIRST PRODUCTION 2-27-1969		PRODUCTION METHOD (Indicate gas lift, pumping—size and type of pump) Flow							
DATE OF TEST 2-1-1969		HOURS TESTED 48	CHOKE SIZE 1"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 40	GAS—MCF. 1000	WATER—BBL. None	GAS-OIL RATIO 25:1	
FLOW, TUBING PRESS.		CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL. 20	GAS—MCF. 1000	WATER—BBL. None	OIL GRAVITY-API (CORR.) 60		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)								TEST WITNESSED BY R. A. Crane, Jr.	
35. LIST OF ATTACHMENTS									
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records									
Original Signed By: SIGNED CLAUDE C. KENNEDY TITLE Operator DATE 3-1-1969									

*(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 33, 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 34.

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	TRUE VERT. DEPTH
Gallup	278			Gallup	278	
Dakota	850		310-320 v hard Some with black gold, Texas Tea, commonly called oil.	Dakota	850	