

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
AMCO PRODUCTION COMPANY

3. ADDRESS OF OPERATOR
501 Airport Drive, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface **1130' FWL & 1720' FWL, Section 26, T-30-N, R-9-W**
At top prod. interval reported below **Same**
At total depth **Same**

14. PERMIT NO. DATE ISSUED

15. DATE SPUDDED **6-7-76** 16. DATE T.D. REACHED **6-13-76** 17. DATE COMPL. (Ready to prod.) **7-6-76**

20. TOTAL DEPTH, MD & TVD **5082'** 21. PLUG, BACK T.D., MD & TVD **5048'** 22. IF MULTIPLE COMPL. HOW MANY*

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
Masaverde 4282-5016'

26. TYPE ELECTRIC AND OTHER LOGS RUN
Correlation, Gamma Ray Compensated Density, Induction Gamma Ray

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8"	40#	269'	12-1/4"	280 sx	None
7"	20#	3020'	8-3/4"	720 sx	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
4-1/2"	2834'	5080'	305	

31. PERFORATION RECORD (Interval, size and number)

4282-4307', 4328-34', 4380-4438', 4453-62', 4570-76', 4582-86', 4638-54', 4730-40', 4820-28', 4865-92', 4896-4920', 4926-72', 5000-07', 5012-16' x 1 SPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4282-4462'	80,000# sn & 40,000 gal. frac fld.
4570-4828'	40,000# sn & 20,000 gal. frac fld.
4865-5016'	80,000# sn & 40,000 gal. frac fld.

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 **7-6-76** HOURS TESTED **3** CHOKER SIZE **.75** PROD'N. FOR TEST PERIOD **Flowing** OIL—BBL. **360** GAS—MCF. **2883** WATER—BBL. **SI** GAS-OIL RATIO

FLOW. TUBING PRESS. **225 psig** CASING PRESSURE **485 - flw** CALCULATED 24-HOUR RATE **2883** OIL—BBL. **2883** GAS—MCF. **2883** WATER—BBL. **2883** OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) **To be sold** TEST WITNESSED BY

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 **J. E. Elliott** TITLE **Area Adm. Supvr.** DATE **7-27-76**

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

5. LEASE DESIGNATION AND SERIAL NO.

ST 078139

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

E. E. Elliott "B"

9. WELL NO.

3A

10. FIELD AND POOL, OR WILDCAT

Blanco Masaverde

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

NE/4 NW/4 Section 26, T-30-N, R-9-W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

19. ELEV. CASINGHEAD

5929' GL

23. INTERVALS DRILLED BY

Surf.-TD

25. WAS DIRECTIONAL SURVEY MADE

No

27. WAS WELL CORED

No

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 both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number 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 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 and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the 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 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, adequate 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.

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.	
FORMATION			NAME	TOI
TOP			MEAS. DEPTH	
BOTTOM				
Cliffhouse Nenafee Point Lookout Mancos	4272' 4464' 4868' 5027'	4464' 4868' 5027'		