

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 ☐										
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐								
2. NAME OF OPERATOR Aztec Oil and Gas															
3. ADDRESS OF OPERATOR Drawer 570, Farmington, New Mexico															
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990 FSL & 920 FWL Sec 28, T-31N, R-12W At top prod. interval reported below At total depth															
14. PERMIT NO.		DATE ISSUED MAY 19 1966													
15. DATE SPUDDED 3/20/66		16. DATE T.D. REACHED 4/5/66		17. DATE COMPL. (Ready to prod.) 5/3/66		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6131 GR		19. ELEV. CASINGHEAD 6131							
20. TOTAL DEPTH, MD & TVD 7196		21. PLUG, BACK T.D., MD & TVD 7156		22. IF MULTIPLE COMPL., HOW MANY* 2		23. INTERVALS DRILLED BY →		24. WAS DIRECTIONAL SURVEY MADE yes							
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7012-28 7058-82 7124-50		25. WAS WELL CORED yes					26. TYPE ELECTRIC AND OTHER LOGS RUN E.S. Induction								
28. CASING RECORD (Report all strings set in well)															
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED					
8-5/8		24#		308		12 1/4		250 SX							
5-1/2		15#		7187		7-7/8		870 SX							
29. LINER RECORD										30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
										1 1/2		6955		6950	
31. PERFORATION RECORD (Interval, size and number) 7012-28 7058-82 7124-50 4 SPF										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
										DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
										7012-7150		60,000# 20/40 sand			
												39,000# 10/20 sand			
33.* PRODUCTION										RECEIVED MAY 20 1966 OIL CON. COM. DIST. 3					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing				WELL STATUS (Producing or shut-in) shut-in									
DATE OF TEST 5/3/66		HOURS TESTED 3 hr		CHOKE SIZE 3/4"		PROD'N. FOR TEST PERIOD →		OIL—BBL. 154		GAS—MCF. 1931		WATER—BBL.		GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE →		OIL—BBL.		GAS—MCF.		WATER—BBL.				OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented										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		TITLE				DATE									
		District Superintendent				May 17, 1966									

*(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 88, 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 36.

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:		38. GEOLOGIC MARKERS	
FORMATION	TOP	NAME	MEAS. DEPTH
			TRUE VERT. DEPTH
Fractured Cliffs	2455		
Cliff House	4022		
Point Lookout	4021		
Ocellup	6098		
Greenhorn	6127		
Greenhorn	6882		
Dakota	7010		