

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other side
for instructions on
traveling with this
form)Form Approved
Holloway Bureau No. 42-10000

5. LEASE DESIGNATION AND SERIAL NO.

14 20 603 2034

WELL COMPLETION OR RECOMPLETION REPORT AND

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 ☐ FEB 03 1984

2. NAME OF OPERATOR

Solar Petroleum, Inc

OIL CON. DIV.

3. ADDRESS OF OPERATOR

1099 18th St #2900 Denver, Colorado 80202

DIST. 3

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 2600 FLM 1287 FEL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

12. COUNTY OR

PARISH

San Juan

13. STATE

New Mexico

15. DATE SPUDDED 9-8-83 16. DATE T.D. REACHED 9-12-83 17. DATE COMPL. (Ready to prod.) 12-20-83 18. ELEVATIONS (OF, RKB, RT, GR, ETC.)* 5193 GR 19. ELEV. CASINGHEAD 5193 GL

20. TOTAL DEPTH, MD & TVD 931 21. PLUG BACK T.D., MD & TVD na 22. IF MULTIPLE COMPL., HOW MANY* na 23. INTERVALS DRILLED BY → ROTARY TOOLS X CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Gallup Open Hole 899-931

25. WAS DIRECTIONAL SURVEY MADE

yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Density

27. WAS WELL CORED

yes

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#	88.77 GL	12 1/4	82.6 cft CIB 2% CaCl ₂ flocc	
5 1/2	15.5#	899 GL	7 7/8	169.40 of Howo-lite	
				41.3 of CIB 2% CaCl ₂ flocc	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	934.2	

31. PERFORATION RECORD (Interval, size and number)

Open Hole 899-931

899

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
900-931	11,000 crosslink gel 17,000# 20-40 SD.

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
12 20 83		Pump				Prod.	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
1-18-84	24	na	→	1.94	tstm	192.06	----
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
na	na	→	1.94	tstm	192.06	39.7	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

tstm

TEST WITNESSED BY

Joe Cantu

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

Marie O'Keefe

TITLE

Engineering Tech.

DATE

1 20 84

FEB 03 1984

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

NMOCC

FARMINGTON RESOURCE AREA

General: This form is designed for submitting a completed and correct form. It is to be used for both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning use will be issued by, or may be obtained from, the local authority, particularly with regard to local, area, or regional procedures and practices, either as shown below or will be issued by, or may be obtained from, the local authority. 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.), formations 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 33.

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, TESTING, CURTAIN USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP MEAS. DEPTH TRUE VERT. DEPTH
Mancos	0	899			
Gallup	899	911	CORE 901-931 REC 28' 11" SD.		

RECEIVED
FEB 03 1984
OIL CON. DIV.
DIST. 3