

Form approved.
Budget Bureau No. 42-~~R~~355.5.

(See other instructions on reverse side)

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

James P. Woosley

3. ADDRESS OF OPERATOR

Box 1227 Cortes Colorado 81321

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

At surface **410' FSL and 2225' FWL**

At top prod. interval reported below

At total depth **Same**

14. PERMIT NO.	DATE ISSUED
	June 10 1976

15. DATE SPURRED	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
9 - 23 - 76	10 - 19 - 76	10 - 25 - 76	5492	

20. TOTAL DEPTH, MD & TVD 1296	21. PLUG, BACK T.D., MD & TVD 1295	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY →	ROTARY TOOLS 0 - 1296	CABLE TOOLS
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24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Lower Gallup 1274 - 1288	25. WAS DIRECTIONAL SURVEY MADE YES
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26. TYPE ELECTRIC AND OTHER LOGS RUN	27. WAS WELL CORED
None	No

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"	22½	30'	9"	Cemented to surface	None
4½"	10.60½	1296	6½"	25 sks	None

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	1238	

31. PERFORATION RECORD (Interval, size and number) intire last joint perforated. basket used above last joint to cement	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. <table border="1"> <thead> <tr> <th data-bbox="777 1321 1037 1327">DEPTH INTERVAL (MD)</th> <th data-bbox="1037 1321 1497 1327">AMOUNT AND KIND OF MATERIAL USED</th> </tr> </thead> <tbody> <tr> <td data-bbox="777 1327 1037 1334"></td> <td data-bbox="1037 1327 1497 1334"></td> </tr> <tr> <td data-bbox="777 1334 1037 1340"></td> <td data-bbox="1037 1334 1497 1340"></td> </tr> <tr> <td data-bbox="777 1340 1037 1344"></td> <td data-bbox="1037 1340 1497 1344"></td> </tr> <tr> <td data-bbox="777 1344 1037 1351"></td> <td data-bbox="1037 1344 1497 1351"></td> </tr> <tr> <td data-bbox="777 1351 1037 1357"></td> <td data-bbox="1037 1351 1497 1357"></td> </tr> </tbody> </table>	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED										
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33.*			PRODUCTION	
DATE FIRST PRODUCTION		PRODUCTION METHOD (<i>Flowing, gas lift, pumping—size and type of pump</i>)		WELL STATUS (<i>Producing or shut-in</i>)
10 - 29 - 76		American D-25		

DATE OF TEST 10 - 30 - 76	HOURS TESTED 24	CHOKE SIZE open	PROD'N. FOR TEST PERIOD ————→	OIL—BBL. 2	GAS—MCF. TSTM	WATER—BBL. 12	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE ————→	OIL—BBL.	GAS—MCF.	WATER—BBL. 		OIL GRAVITY-API (CORR.) 42

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	TEST WITNESSED BY
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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 James P. Mosley TITLE Operator DATE Nov. 8 1976

***(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 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	TRUE VERT. DEPTH
Over burden	0	19				
Shale	19	1274				
Gallup SS	1274	1288	Lower Gallup SS			
Lime	1288	1296	dark shaley fossilised			