



NOV 20 1984

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY(See other in-  
structions on  
reverse side)Form approved  
Budget Bureau No. 42-1855.5  
COTTON, AS, COMM.

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL:		OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	Other <input type="checkbox"/>												
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other <input type="checkbox"/>										
2. NAME OF OPERATOR 51408 Lubauer Petroleum Co.																	
3. ADDRESS OF OPERATOR 1917 East Washington Phoenix, Arizona																	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 5423 At top prod. interval reported below At total depth 4174																	
14. PERMIT NO.				DATE ISSUED 4/19/66													
15. DATE SPUDDED 4/16/66		16. DATE T.D. REACHED 7/23/66		17. DATE COMPL. (Ready to prod.) 8/25/66		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*		19. ELEV. CASINGHEAD 5424'									
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS		CABLE TOOLS							
				no		Rotary											
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*										25. WAS DIRECTIONAL SURVEY MADE yes							
26. TYPE ELECTRIC AND OTHER LOGS RUN NONE										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							
7 7/8"		20 lbs		540'		12 1/4"		top to bottom		none							
29. LINER RECORD																	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		TUBING RECORD							
no		none		none		none		none		2 7/8"							
30. TUBING RECORD						31. PERFORATION RECORD (Interval, size and number)											
N O N E						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.											
N O N E						33.* PRODUCTION											
DATE FIRST PRODUCTION Aug. 25 '66						PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping						WELL STATUS (Producing or shut-in) Producing					
DATE OF TEST Aug. 25		HOURS TESTED 10 hrs		CHOKE SIZE		PROD'N. FOR TEST PERIOD 30 bbl		OIL—BBL. 0		GAS—MCF. 0		WATER—BBL. 0		GAS-OIL RATIO None			
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL. 5		GAS—MCF. 0		WATER—BBL. 0		OIL GRAVITY-API (CORR.) 41.0					
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) NONE												TEST WITNESSED BY Lee Seaton					
35. LIST OF ATTACHMENTS NONE																	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																	
SIGNED <u>Lee Seaton</u> TITLE <u>Owner</u> DATE <u>7/12/66</u>																	

\*(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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Mancos	0	320	Hit fresh water
"	320	345	Water - Sand
"	345	1635	Gray shale
"	1635	1640	Oil show - brown shale
"	1640	2080	Gray shale
"	2080	2643	Brown shale
"	2643	3440	Gray shale
"	3440	3890	Brown shale and sand lenses
"	3890	3914	Brown shale and " "
"	3914	4174	Oil saturation and oil

### 38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH