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By James Thum at 7:40 am, Jan 03, 2022

IDAHO OIL AND GAS CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND WELL REPORT



DESIGNATE TYPE OF COMPLETION:

New Well [] Work-Over [] Deepen [] Plug Back [] Same Reservoir [] Different Reservoir [] Oil [] Gas [] Dry []

Well Name/Number: _____ US Well Number: _____

Operator: _____ Contact Person: _____

Address: _____

Field & Reservoir: _____ County: _____

Location: (Sec.-TWP-Range or Block & Survey): _____ Date Permit Issued: _____

Table with 5 columns: Date spudded, Date total depth reached, Date completed, ready to produce, Elevation (DF, RKB, RT, or GR), Elevation of casing hd. Flange. Includes rows for completion type, producing intervals, and directional survey information.

1 Plug Back Total Depth

CASING RECORD

Casing (report all strings set in well—conductor, surface, intermediate, producing, etc.)

Table with 7 columns: Purpose, Size Hole Drilled, Size Casing set, Weight (lb./ft.), Depth set, Sacks Cement, Amount. Pulled

TUBING RECORD

LINER RECORD

Table with 9 columns: Size: (ft), Tubing Weight, Depth: (ft), Packer set at: (ft), Size: (ft), Top: (ft), Bottom: (ft), Sacks Cement, Screen: (ft)

PERFORATION RECORD

ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

Table with 5 columns: Number per ft., Size & Type, Depth Interval, Amount & Kind of Material Used, Depth Interval

Date of First Production:

NOTE: Please attach copies of ALL pressure tests performed including: multi-point tests, build-up tests, bottom-hole pressure tests, and RFT's.

Table with 6 columns: Date of Test, Hrs. Tested, Choke Size, Oil Prod. During Test (bbls.), Gas Prod. During Test (MCF), Water Prod. During Test (bbls.). Includes rows for tubing pressure and production rates.

Disposition of gas (state whether vented, used for fuel or sold):



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Well Name/Number: _____ US Well Number: _____

Operator: _____

DETAIL OF FORMATIONS PENETRATED

Formation	Top	Bottom	Description*

*In accordance with IDAPA 20.07.02.10.58, describe the strata, water, oil, or gas encountered. Provide additional information as to give volumes, pressures, rate of fill-up, water depths, caving strata, etc, as is usually recorded in normal procedure of drilling. Show all important zones of porosity, lithologic description of all cores, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

INSTRUCTIONS: IF NEEDED, PLEASE ATTACH A SEPARATE DOCUMENT FOR FORMATION DETAIL, IF PAGE TWO DOES NOT PROVIDE ENOUGH ROOM TO DO SO.

CERTIFICATE: I, the undersigned, state that I am the _____ of the _____ (company) and that I am authorized by said company to make this report and that this report was prepared under my supervision and direction and that the facts stated herein are true, correct and complete to the best of my knowledge.

Date

Thomas W. Dolence Jr.

Signature

This Well Completion or Recompletion Report and Well Report shall be filed with the:

Idaho Department of Lands
Oil and Gas Division
300 N. 6th Street, Suite 103
Boise, Idaho, 83702

not later than thirty (30) days after project completion as per Rule 20.07.02.340 and Idaho Code § 47-3.