



# INSTRUCTIONS FOR: WELL DRILLING AND COMPLETION REPORT FORM

The Division of Mineral Resources has developed this form to accommodate newer drilling technologies and to conform to the American Petroleum Institute's (API) well identification number system. For a complete description of the API numbering system, visit the Division's website. Instructions and examples for completing the form are below.

The completed form should be submitted along with 2 copies of all well logs run, a Plugging Report form 85-15-8, if required, and a complete directional survey for deviated wells to the appropriate Regional office. If you have any questions or need any further assistance with the forms, please feel free to contact the Regional office responsible for the area where the well is located or visit our website.

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| Allegany Office | (716) 372-0645 | (Allegany, Cattaraugus, Chautauqua, Erie, Niagara and Wyoming counties)   |
| Avon Office     | (585) 226-2466 | (Jefferson, St. Lawrence, Lewis, Oneida, Herkimer, Oswego, Cayuga, Onondaga, Madison, Tompkins, Cortland, Chenango, Broome, Orleans, Monroe, Wayne, Genesee, Livingston, Ontario, Yates, Seneca, Steuben, Schuyler, Tioga and Chemung counties) |
| Albany Office   | (518) 402-8056 | (All other counties)  |

## DRILLING AND GENERAL INFORMATION

- Well Name and Number -** Enter the well name and number. By convention, the Division uses **Last Name First Initial** where possible. For example, a lease name of John A. Smith would be entered as **Smith (space) J**. Similarly by convention, the Division designates the first well on a lease as number 1, the second number 2, etc., and uses the alphabetical designator **A, B, C**, etc., for successive wells in the same well bore or for well locations skidded less than 75' from the permitted location. For example, a sidetrack or skid of the John A. Smith number 1 well would be entered as **Smith J 1A**.
- API Well Identification - Number** Enter the API number assigned to the well as shown on the Well Drilling Permit.
- Well Owner -** Enter the owner name. This information should be the same as that included in the Organizational Report on file with the Division.
- Type of Report -** Check the appropriate box for the type of report. A Final Report should be submitted along with two copies of all logs run within 30 days of completing a well. An Interim report should be filed within 90 days of temporarily discontinuing operations on a well.  
**Note:** In addition to the Interim Completion Report, a Request for Shut-in or Temporary Abandonment form (85-16-4) should also be filed.
- Type of Well -** Check the appropriate box for the type of well. Check **NEW** if the well was a new well drilled from surface or **EXISTING** if the well was a sidetrack in an existing well.
- Type of Well Bore -** Check the appropriate box for the type of well bore: **VERTICAL**, **DIRECTIONAL** or **HORIZONTAL**. By convention, the Division defines a Vertical well as any new well drilled as a straight hole from the surface location, a Directional well as any new well drilled either from the surface or within an existing well bore and intentionally deviated from the surface location, and a Horizontal well as any new well drilled either from the surface or from an existing well bore where any portion of the well is drilled horizontally or at a near horizontal attitude.  
**Note:** If the well is a directional or sidetrack, also submit a complete angular deviation and directional survey.
- Type of Operation -** Check the appropriate box for the type of operation. Select **DRILL** if a new well was drilled from either surface or from an existing well bore. Select either **PLUG BACK**, **DEEPENING** or **CONVERT** for the appropriate type of operation conducted in an existing well bore.
- Well Type -** Check the appropriate box for well type.
- Fluids Produced or - Injected** Check the appropriate boxes for the type(s) of fluids produced or injected.
- Type of Completion -** Check the appropriate box for the type of completion. Select **SINGLE** for wells completed in a single pool or **MULTIPLE** for wells completed in more than one pool.
- Quad, Section -** Enter the appropriate 7½ minute topographic map and section. By convention, the Division uses the letter designations **A-I** for each section. The correct section can be determined by dividing the 7½ minute topographic map into 9 sections along the 2½ minute divisions and lettering them from left to right as shown.
 

|          |          |          |
|----------|----------|----------|
| <b>A</b> | <b>B</b> | <b>C</b> |
| <b>D</b> | <b>E</b> | <b>F</b> |
| <b>G</b> | <b>H</b> | <b>I</b> |
- Location -** Enter the appropriate locations for the Surface, Top of the Target Interval, Bottom of the Target Interval and Bottom Hole Location. Enter latitude and longitude as decimal degrees in the format **DD.DDDDDD** using the North American Datum of 1983. Also, enter the True Vertical Depth (**TVD**) and True Measured Depth (**TMD**) for the Top of the Target Interval, Bottom of the Target Interval and Bottom Hole locations. For fault-bounded Trenton-Black River hydrothermal dolomite reservoirs, the target interval is the extent of the proposed productive section that will be penetrated by the wellbore between the bounding faults. For all other reservoirs, the target interval is the target formation.  
**Note:** By convention, the Division defines a Vertical well as any new well drilled as a straight hole from the surface location, a Directional well as any new well drilled and intentionally deviated from the surface location and a Sidetrack as any well drilled within an existing well bore.

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- Producing Formations -** Enter the producing formation(s).
- Deepest Formation - Penetrated** Enter the deepest formation penetrated.
- Drilling Contractors -** Enter the name(s) of the drilling contractor(s) used.
- County, Town -** Enter the appropriate County and Town where the surface of the well is located.
- Field, Pool Name -** Enter the appropriate field or pool name(s) of the producing formation(s). If the completed bottom hole location is more than 1 mile from an existing field or pool or 2½ miles in the case of a Medina well, enter **WILDCAT** as the field/pool name.
- Drilling Dates -** Enter the date drilling commenced, date drilling was completed, and date of final completion/recompletion in the appropriate boxes. For an Interim report where operations have been temporarily discontinued, leave the date of final completion blank. Within 90 days of temporarily discontinuing operations on a well a Request for Shut-in or Temporary Abandonment form 85-16-4 should also be filed.
- Cable/Rotary Tools -** Enter the **(TMD)** in feet that the well was drilled with either cable or rotary tools in the appropriate boxes.  
**Note:** For vertical wells, use **TMD** to record depths for the report.
- Rotary Drilling Fluids -** Check the appropriate box(s) for the type(s) of fluids used to drill the well.
- Driller's, Logger's TD -** Enter the appropriate **TVD** and **TMD** for driller's total depth and logger's total depth.
- Plug Back TD -** Enter the appropriate **TVD** and **TMD** plug back depths. If the well was NOT plugged back completely with cement and abandoned, a Supplementary Plug Back Report Form should also be filed to show the details of the plug back.
- Kickoff Depth -** Enter the **TMD** of the kickoff depth if the well is a Directional or Sidetrack. If the well is an intentionally deviated well from surface, enter 0 as the kickoff depth. For Vertical wells, leave the Kickoff depth blank.
- Elev./Datum -** Enter the elevation of the surface location in feet and check the appropriate box for how the elevation was obtained, either topographic map or by survey. Next, enter the datum in feet used to record the depths for this report and check the appropriate box from where the datum was measured, either derrick floor (DF), kelly bushing (KB) or ground level (GL).
- Wireline Logs -** Check the appropriate box for all the types of logs run. Two (2) copies of each log run should be submitted with the final completion report form.
- Well Cored, Cuttings -** Check the appropriate box to indicate if the well was cored and if cored, check the appropriate box for the type of core taken. Next, check the appropriate box to indicate if cuttings were collected for the State.
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**CASING PROGRAM**

- Casing Strings -** Enter the information for each of the casing strings in the appropriate columns. Enter the hole size and pipe size in inches. Enter the grade and weight of the pipe and whether it was new or used pipe. Enter the depths of casing set, depths of centralizers used, and depths of baskets used in TMD.
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**CEMENT DATA**

- Cement Data -** Enter the cement data for each casing string in the appropriate columns. Enter the class and type of cement used, the number of sacks, slurry weight and yield. Enter the volume in cubic feet, the TMD of the cement top and the Waiting On Cement (W.O.C.) time in hours.
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**PAGE TWO**

- Well Name, API Number -** Enter the well name and number, and the API Well Identification Number as shown on page one.
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**PRECOMPLETION TESTS**

- Pre-completion Tests -** Enter the pre-completion test data in the appropriate columns for each zone tested. Enter the type of test, drill stem test (dst), bailer (bail) or other. Enter the TMD of each interval tested, the duration of the test in hours, and the types and amounts of fluids produced or other data.
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**COMPLETION DATA**

- Completion Equipment -** List the types and depths of the completion equipment used in the well.
- Open Hole -** For wells completed open hole, enter the TMD of the open hole intervals.
- Perforations -** Enter the TMD and number of shots for each interval perforated. For wells that were notched, enter the word NOTCHED in the number of shots column.

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**STIMULATION DATA**

**Zones Treated, Data -** Enter the TMD for each interval treated. Enter the details of each treatment, including additive name(s), type(s) and volume(s) used, treatment rates, breakdown pressure, average treatment pressure, initial shut-in surface pressure and, if taken, bottom hole pressures. Attach additional sheets as necessary.

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**PRODUCTION TEST**

**Formation Tested -** Enter the formation tested. For dual or multiple completions attach additional information, as necessary, for each of the formations tested.

**Gas/Oil, Shut-in -** Check the appropriate box for the type of gas test performed, BUILD UP, OPEN FLOW or DRAWDOWN. If applicable, check the appropriate box for the type of oil test performed, PUMP or FLOW. Next, enter the initial shut-in surface and bottom hole pressures.

**Duration, Flowing Test -** Enter the duration of the test in hours. Next, if applicable, enter the appropriate choke size in inches, flowing tubing pressure, flowing casing pressure, shut-in tubing pressure, shut-in casing pressure and shut-in time in hours.

**Production, Gas -** Enter, if applicable, the amount of oil produced in barrels per day (BPD), water in BPD, and gas in thousand cubic feet per day (MCFPD). Next, check the appropriate box for the type of test performed and enter the starting date of the test.

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**RECORD OF FORMATIONS PENETRATED**

**Unconsolidated -** Enter the TMD and TVD of each unconsolidated formation penetrated and the formation name, if known. Enter the type of rock or material encountered and the quantity and depths of any fresh water.

**Bedrock -** Enter the TMD and TVD of each formation penetrated from bedrock to total depth and the formation name. Enter the type of rock encountered and the quantity and depths of any fresh water, brine, oil and/or gas.

**Note:** all depth reported in this section shall be from ground elevation.

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**SIGNATURE Section (Page 1)**

**Signature Section -** Complete the signature section. Print or type the name of the authorized representative, title, date and then sign the form. The person signing the completion report must be authorized to do so on the Organizational Report on file with the Division. The use of an electronic signature indicates the signer's intent to sign the document and is the legal equivalent of having placed a handwritten signature on the form.