

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____				5. LEASE DESIGNATION AND SERIAL NO. NM 8269	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Tenneco Oil Company				7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 720 S. Colorado Blvd., Denver, CO 80222				8. FARM OR LEASE NAME Hospah	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1360' FNL and 900' FEL, Unit H At top prod. interval reported below At total depth				9. WELL NO. 64	
14. PERMIT NO.				12. COUNTY OR PARISH McKinley	
DATE ISSUED				13. STATE New Mexico	
15. DATE SPEC'D	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATIONS (DF, RES, ET, GR, ETC.)*	19. ELEV. CASINGHEAD	
11-2-78	11-4-78	12-11-78	6951 GR		
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
1685' KB	1643 KB			0-1685	None
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Lower Hospah - 1590' 1605'				25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN CDL/GR, IEL				27. WAS WELL COBED Yes	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB/FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8"	36#	90'	13 3/4"	90 Sx Class "B" 2% CaCl	None
7"	23#	1680'	8 3/4"	375 Sx Class "B" 2% CaCl	None
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2 7/8"	1598 Incl Pump	None			
31. PERFORATION RECORD (Interval, size and number) 60 Holes from 1590' to 1605'			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
DEPTH INTERVAL (MD)			AMOUNT AND KIND OF MATERIAL USED		
1590' - 1605'			500 Gal. 15% HCL		
33.* PRODUCTION					
DATE FIRST PRODUCTION 12-14-78		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) 2 1/4" Tubg pump		WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 12-14-78	HOURS TESTED 18	CHOKE SIZE 1	PROD'N. FOR TEST PERIOD →	OIL—BBL. 100	GAS—MCF. -0-
WATER—BBL. 100	FLOW. TUBING PRESS. 0	CASING PRESSURE →	CALCULATED 24-HOUR RATE →	OIL—BBL. 133	GAS—MCF. -0-
WATER—BBL. 133	OIL GRAVITY-API (CORR.)				
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)				TEST WITNESSED BY	
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 <u>Corley J. Hatten</u>		TITLE <u>Administrative Supervisor</u>		DATE <u>1/11/79</u>	

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

NMOCC

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 (drillern, 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, tops(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 POROSITY 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.	38. GEOLOGIC MARKERS	
				NAME	MEAS. DEPTH
Point Lookout	280'	515'		Point Lookout	280'
Crevasse Canyon	830'	990		Mancos Shale	515'
Upper Hospah	1540'	1586		Cravasse Canyon	830'
Lower Hospah	1592	+-		Upper Hospah	1540'
				Lower Hospah	1592'