

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUEMIT IN DUPLICATE*

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1. 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

Amerada Hess Corporation

3. ADDRESS OF OPERATOR

Drawer D, Monument, New Mexico 88265

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

At surface 990' FSL & 990' FWL

At top prod. interval reported below Same

At total depth

14. PERMIT NO.

Verbal

DATE ISSUED

5-4-77

5. LEASE DESIGNATION AND SERIAL NO.

Jicarilla Contract #158

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

J. Apache "H" Tract 2

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

So. Blanco Pictured Cliffs

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 9, T23N, R2W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

15. DATE SPUDDED 5-31-77 16. DATE T.D. REACHED 6-6-77 17. DATE COMPL. (Ready to prod.) 6-21-77 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 7278' GR 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 3162' 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 0-3162' ROTARY TOOLS CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

3054' to 3069' - Pictured Cliffs

25. WAS DIRECTIONAL SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

IEL, w/SP, CDL w/GR Neutron & caliper

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
9-5/8"	32#	362'	13-3/4"	400 sks.	-
4-1/2"	10.5# & 9.5#	3161'	8-3/4"	800 sks.	-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1-1/4"	3052'	-

31. PERFORATION RECORD (Interval, size and number)

4-1/2" csg. perf. fr. 3054' to 3069' w/2 SPF

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3054' - 3069'	53,000# sand & 575,000 cu. ft. nitrogen

33.* PRODUCTION

DATE FIRST PRODUCTION 6-21-77 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flow WELL STATUS (Producing or shut-in) CI pending gas conn.

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-22-77	16	3/4"	→	-	1004.4 AOF	-	-
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
back pressure of 20#	→	→	-	1506.6 AOF	-	-	-

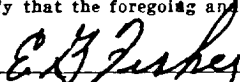
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented 1004.4 MCF for testing purposes only

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



TITLE

Supv. Adm. Ser.

DATE

6-30-77

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

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 23: If this was completed for separate production from more than one interval zone (multiple completion), so state 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: "Stacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. (See instruction for items 22 and 24 above.)

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