

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. Jicarilla 428	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. ESTVR ☐ Other <u>Rework of dry hole</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Tribe	
2. NAME OF OPERATOR J. Gregory Verrion and Robert L. Boyless		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 1541 Farrington, New Mexico 87401		8. FARM OR LEASE NAME Contract 428	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1850' FNL and 1850' FBL At top prod. interval reported below Same At total depth Same		9. WELL NO. 1	
14. PERMIT NO. _____		10. FIELD AND POOL, OR WILDCAT Wildcat	
15. DATE SPUNDED 8-8-74		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 32, T23N, R4E	
16. DATE T.D. REACHED 8-10-74		12. COUNTY OR PARISH Sandoval	
17. DATE COMPL. (Ready to prod.) 4-9-75		13. STATE New Mexico	
18. ELEVATIONS (DT, RKB, RT, GR, ETC.)* 6000 GL		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 2700	21. PLUG BACK T.D., MD & TVD 2369	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY All
24. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* 2262-66, 2276-80 Pictured Cliff			25. WAS DIRECTIONAL SURVEY MADE No
26. TYPE ELECTRIC AND OTHER LOGS RUN Electric log previously run when well originally drilled			27. WAS WELL CORED No
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8	24	100	12 1/4
2 7/8	6.4	2369	6 3/8
CEMENTING RECORD		AMOUNT FULLED	
100 sax		Circulated	
276 cu. feet			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number) 2262-66, 2276-80 10-3/8" holes		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD) 2262-80		AMOUNT AND KIND OF MATERIAL USED Fraced 600 barrels gel water and 30,000# sand	
33. PRODUCTION			
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump) Flowing		WELL STATUS (Producing or shut-in) Shut-in for pipeline connection
DATE OF TEST 4-12-75	HOURS TESTED 24	CHOKE SIZE 3/8	PROD'N. FOR TEST PERIOD 2200
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL--BBL. 2200
			GAS--MCF. 2200
			WATER--BBL.
			OIL GRAVITY-API (CORR.)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented			TEST WITNESSED BY R. L. Boyless
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>R. L. Boyless</u>		TITLE <u>Operator</u>	
		DATE <u>August 29, 1975</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 23, 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 33.

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 13: 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			38. GEOLOGIC MARKERS				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
			See original drilled well by Elenbogen				