

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

14-08-0001-12395

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

LAS MILPAS GAS STORAGE

8. FARM OR LEASE NAME

SAN YSIDRO

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

GAS STORAGE

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

Sec. 20, T-15N, R-1E
N.M.P.M.

12. COUNTY OR PARISH

SANDOVAL

13. STATE

NEW MEXICO

14. PERMIT NO.

DATE ISSUED

15. DATE SHUT-IN

16. DATE OF LEASE

17. DATE WELL FIRST TO PROD.

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

19. ELEV. CASINGHEAD

1/10/74

1/15/74

1/18/74

5830 FT. D.F.

5830 FT.

20. TOTAL DEPTH, MD & TVD

21. PLUG. BACK T.D., MD & TVD

22. IF MULTIPLE COMPL.

23. INTERVALS

ROTARY TOOLS

CABLE TOOLS

2423' MD & TVD

2377 FT. MD & TVD

HOW MANY*

DRILLED BY

0-2423

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

2270 - 2290 FT. MD & TVD AQUA ZARCA

25. WAS DIRECTIONAL SURVEY MADE

NO

26. TYPE ELECTRIC AND OTHER LOGS RUN

INDUCTION-ELECTRICAL, DENSITY, GAMMA-RAY NEUTRON, CEMENT BOND

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

8-5/8"

28.0#

486 FT.

12-1/4"

325 BAGS

H ONE

5-1/2"

15.50#

2422 FT.

7-7/8"

1ST STAGE CEMENTED 8/350 CU. FT. OF

CEMENT.

STAGE COLLAR SET AT 1215 FT. R.K.B.

2ND STAGE CEMENTED 8/450 CU. FT. OF CEMENT

29. LINER RECORD

SIZE

TOP (MD)

BOTTOM (MD)

SACKS CEMENT*

SCREEN (MD)

30. TUBING RECORD

SIZE

DEPTH SET (MD)

PACKER SET (MD)

2-3/8" ELB

2180 FT.

31. PERFORATION RECORD (Interval, size and number)

PERFORATED 4 SHOOTS/FT. 2270 - 2290 FT.
TOTAL OF 80 HOLES.
0.48" HOLE SIZE.

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

DEPTH INTERVAL (MD)

AMOUNT AND KIND OF MATERIAL USED

33. PRODUCTION
DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump)

WELL STATUS (Producing or shut-in)

SHUT-IN

DATE OF TEST

HOURS TESTED

CHOKE SIZE

PROD'N. FOR TEST PERIOD

OIL--BBL.

GAS--MCF

WATER--BBL.

OIL--BBL. (CORR.)

None

FLOW. TUBING PRESS.

CASING PRESSURE

CALCULATED 24-HOUR RATE

OIL--BBL.

GAS--MCF

WATER

BBL.

OIL--BBL. (CORR.)

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

35. LIST OF ATTACHMENTS

36. I hereby certify that the

Original signed by

SIGNED

Dan R. Collier

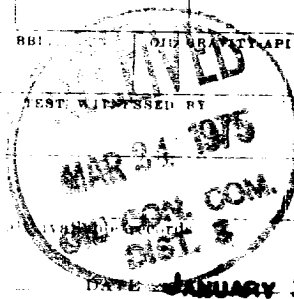
TITLE

OFFICE MANAGER

Dan R. Collier

DATE JANUARY 23, 1974

*(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 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: interval, or intervals, top(s), bottom(s) and name(s) (if any) for daily 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: *See item 18 above.* 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.)

SUMMARY OF FORMER ZONES		GEOLOGIC MARKERS	
ITEM 22 AND 24: IF THIS WELL IS COMPLETED FOR SEPARATE PRODUCTION FROM MORE THAN ONE INTERVAL (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 daily 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: <i>See item 18 above.</i> 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.)	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.)
TOP	BOTTOM	NAME	MEAS. DEPTH TOP TRUE VERT. DEPTH
		AQUA ZARCA	2266