## UNITED STATES SUBMIT IN DUPLICATE. DEPARTMENT OF THE INTERIOR

(See other instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY Jicarilla Cont. -127
6. IF INDIAN, ALLOTTEE OR TRIBE NAME WELL COMPLETION OR RECOMPLETION REPORT AND LOG\* Jicarilla Tribe 1a. TYPE OF WELL: WELL X Other b. TYPE OF COMPLETION: WELL X DEEP-EN PLUG BACK S. FARM OR LEASE NAME Other . 2. NAME OF OPERATOR Apache Manning Gas & Oil Company 9. WELL NO 3. ADDRESS OF OPERATOR 80203 15 10. FIELD AND FOOL, OR WILDCAT 1660 Lincoln Street, Suite 2502 CATION OF WELL (Report location clearly and in accordance with Denver Colo. So. Blanco P. At surface 1040'FSQ, 819 FWL 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA At top prod. interval reported below Sec.4-T24N-R4W Same At total depth N.M.P.M. 14. PERMIT NO. DATE ISSUED 12. COUNTY OR Same 13. STATE PARISE Rio Arriba | New Mex. 15. DATE SPUDDED 16. DATE T.D. REACHED | 17. DATE COMPL. (Ready prod. 18. ELEVATIONS (DF, REB, RT, GR, ETC.)\* 19. ELEV. CASINGHEAD -76 <u>,6753 DF,6754 KB</u> 4-17-76 6742 20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL. ROTARY TOOLS 23. INTERVALS CABLE TOOLE HOW MANY DRILLED BY 2913 24. PRODUCING INTERVAL(8), OF THIS COMPLETION-TOP, BOTTOM, NAME (MD AND TVD) 25. WAS DIRECTIONAL SURVEY MADE 2810-2828, Pictured Cliffs Νo 26. TYPE ELECTRIC AND OTHER LOGS BUN 27. WAS WELL CORED <u> CNL - Density</u> Νo 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" 24.0 143 12-1/4" 160 sacks NONE 4-1/2" 10.5 2950 7-7/8" 100 sacks NONE 29. LINER RECORD 30. TUBING RECORD BIZE TOP (MD) BOTTOM (MD) SACKS CEMENT SCREEN (MD) SIZE DEPTH SET (MD) PACKER SET (MD) NONE 1-1/4" 2804 NONE 31. PERFORATION RECORD (Interval, size and number) 82. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 2810' - 2828', 2 shts. per foot 2810-2828 40.500 gals. water 80,000 lhs. sand 33.\* PRODUCTION Waiting on PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in) pipeline Flow Shut In DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL-BBL. GAS-MCF. WATER-GAS-OIL RATIO 3/4" 5-8-76 3hrs. ∙0-666 FLOW. TUBING PRESS. CASING PRESSURE CALCULATED WATER-BBL. OIL GRAVITY-API (CORR.) 24-HOUR RATE 47 psig 330 psig -0-666 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Calc. AOF- 768 MCF TEST WITNESSED BY Shut in Pressures, Tbg.-857 psig, Csg.-857 35. LIST OF ATTACHMENTS giaq For: Manning Gas & Oil Company
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records President, Walsh Engineering TITLE & Prod. Corp. SIGNED <u>May 10 1976</u>

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.

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 for each additional interval to be separately produced, showing the additional data pertinent to such interval.

| Year 29: "Sacks Coment": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. 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, ltem 18: Indicate which elevation is used as reference (where not otherwise shown) for lepth measurements given in other spaces on this form and in any attachments.

Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

	FORMATION TOP BOTTOM