

27 10

6 MMS, Fmn 1 McHugh

1 File

1 Kenai

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

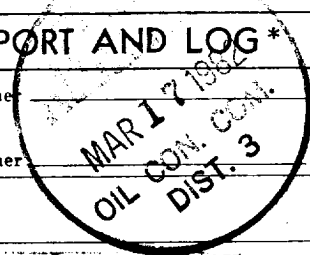
UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

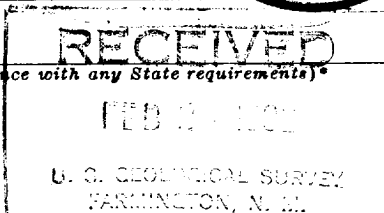
1a. TYPE OF WELL: OIL WELL [] GAS WELL [] DRY [X] Other []
b. TYPE OF COMPLETION: NEW WELL [X] WORK OVER [] DEEP-EN [] PLUG BACK [] DIFF. RESVR. [] Other []



2. NAME OF OPERATOR: Jercme P. McHugh

3. ADDRESS OF OPERATOR: P O Box 208, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface: 1650' FSL - 790' FEL
At top prod. interval reported below
At total depth



14. PERMIT NO. DATE ISSUED: 12-11-79

5. LEASE DESIGNATION AND SERIAL NO.

NM 23032

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal

9. WELL NO.

43-X

10. FIELD AND POOL, OR WILDCAT

Gavilan P.C.

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

Sec 2 T24N R2W

12. COUNTY OR PARISH: Rio Arriba 13. STATE: NM

15. DATE SPUDDED: 12-28-79 16. DATE T.D. REACHED: 3-4-80 17. DATE COMPL. (Ready for Prod.): 7-17-81 P & A 18. ELEVATIONS (DF, RSB, RT, GR, ETC.): 7285' GL 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD: 3482' RKB 21. PLUG, BACK T.D., MD & TVD: 3342' 22. IF MULTIPLE COMPL., HOW MANY*: NA 23. INTERVALS DRILLED BY: TD 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*: NA 25. WAS DIRECTIONAL SURVEY MADE: NO 26. TYPE ELECTRIC AND OTHER LOGS RUN: CD Side wall Neutron, GR-CCL-CB, IES 27. WAS WELL CORED: NO

CASING RECORD (Report all strings set in well)

Table with columns: CASING SIZE, WEIGHT, LB./FT., DEPTH SET (MD), HOLE SIZE, CEMENTING RECORD, AMOUNT PULLED. Includes data for 8-5/8" and 4-1/2" casings.

Table with columns: LINER RECORD (SIZE, TOP (MD), BOTTOM (MD), SACKS CEMENT*, SCREEN (MD)) and TUBING RECORD (SIZE, DEPTH SET (MD), PACKER SET (MD)).

Table with columns: PERFORATION RECORD (Interval, size and number) and ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. (DEPTH INTERVAL (MD), AMOUNT AND KIND OF MATERIAL USED).

Table with columns: PRODUCTION (DATE FIRST PRODUCTION, PRODUCTION METHOD, WELL STATUS) and TEST DATA (DATE OF TEST, HOURS TESTED, CHOKER SIZE, PROD'N. FOR TEST PERIOD, OIL-BBL., GAS-MCF., WATER-BBL., GAS-OIL RATIO).

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

35. LIST OF ATTACHMENTS: Well plugged and abandoned as a gas well; est. cement top 2309' Left csq. in hole per land owners' request for possible use as water. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.

ACCEPTED FOR RECORD

SIGNED: Jim L. Jacobs TITLE: Agent DATE: MAR 21 1982

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

NMOCC

FARMINGTON DISTRICT BY: [Signature]

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 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 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, 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 TRUB VERT. DEPTH
			Ojo Alamo Kirtland Fruitland Pictured Cliffs
			1285' 1604 2790 3340