

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. 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 El Paso Natural Gas Company						7. UNIT AGREEMENT NAME Lindrith Unit	
3. ADDRESS OF OPERATOR P. O. Box 289, Farmington, New Mexico 87401						8. FARM OR LEASE NAME Lindrith Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1520' N, 810' W At top prod. interval reported below At total depth						9. WELL NO. 102	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED 09-12-80						16. DATE T.D. REACHED 09-16-80	
17. DATE COMPL. (Ready to prod.) 12-22-80						18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6961'	
19. ELEV. CASINGHEAD						20. TOTAL DEPTH, MD & TVD 3325'	
21. PLUG, BACK T.D., MD & TVD 3308						22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY						ROTARY TOOLS 0-3325	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3194-3258' (P.C.)						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN GR-NBC; IES; Temp. Survey						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 #		125'		12 1/4"	
4 1/2"		10.5 #		3325'		7 7/8"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
1 1/4"		3251'					
31. PERFORATION RECORD (Interval, size and number)							
3194, 3233, 3238, 3242, 3248' 3253, 3258' W/1 SPZ.							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
3194-3258				35,000 # sd, 42,900 gal. wtr.			
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) AFG = 461				WELL STATUS (Producing or shut-in) shut-in	
DATE OF TEST 12-22-80		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
FLOW. TUBING PRESS. SI 974		CASING PRESSURE SI 977		CALCULATED 24-HOUR RATE		OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							
TEST WITNESSED BY Harrison Harvey							
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

D. H. GuiseTITLE Drilling ClerkDATE January 7, 1981

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

MOCC

FARMINGTON DISTRICT

BY

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 pertinent information should be submitted to the local Federal and/or State office.

tion 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 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so indicate in the space provided.

For each additional interval to be separately produced, showing the additional data pertinent to such interval, submit a separate report (page) on this form, adequately identified, for only the interval reported in item 22, and in item 24 show the producing interval, (multiple completion), so state in item 22, and in item 24 show the producing interval, (multiple completion).

Item 29: "NACE's Concept". Attached completed form is:

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	TRUE VERT. DEPTH
				O.A.	2845'	
				Kirtland	2950'	
				Fruitland	2994'	
				P.C.	3183'	