

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
Jerome P. McHugh

3. ADDRESS OF OPERATOR
Box 234, Farmington, N. M.4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface **1650' fs1 1850' fw1**

At top prod. interval reported below

At total depth

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUNDED **4/17/69** 16. DATE T.D. REACHED **4/22/69** 17. DATE COMPL. (Ready to prod.) **5/21/69** 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* **6476' R.K.B.** 19. ELEV. CASINGHEAD _____
20. TOTAL DEPTH, MD & TVD **2310'** 21. PLUG, BACK T.D., MD & TVD **2272'** 22. IF MULTIPLE COMPL., HOW MANY* **Single** 23. INTERVALS DRILLED BY **0-2310'** ROTARY TOOLS _____ CABLE TOOLS _____
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* **Pictured Cliffs 2227' to 2246'** 25. WAS DIRECTIONAL SURVEY MADE **Yes**

26. TYPE ELECTRIC AND OTHER LOGS RUN
Melox I.E.S. & Density

CASING RECORD (Report all strings set in well)				CEMENTING RECORD		AMOUNT PULLED
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE			
8 5/8"	20#	91'	11 1/4"	75 sx.		---
4 1/2"	9.54	2309'	6 3/4"	150 sx.		---

LINER RECORD					TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
		None			1 1/4"	2250'	---

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2227' - 2236', 2239' - 2246'		2227' - 2246'	810 bbls. water 30,000# 20-40 sd.

33.* PRODUCTION				WELL STATUS (Producing or shut-in)			
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)						
5/6/69	3 hrs.	5/8"	374	---	---	---	---
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
5/6/69	3 hrs.	5/8"	---	---	374	---	---
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
33	569	---	---	424 CAOF	---	---	---

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

Shut In

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 **Original signed by T. A. Dugas** TITLE **Engineer**DATE **8/5/69**

*(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 or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

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 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.
			LOG TOPS Kirtland Fruitland Pictured Cliffs Lewis 1650' 2042' 2179' 2255'

MEAS. DEPTH	TOP	TRUE VERT. DEPTH