

Corrected Copy  
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.

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL: <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> Other _____				5. LEASE DESIGNATION AND SERIAL NO. SF 079265	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR El Paso Natural Gas Company				7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401				8. FARM OR LEASE NAME Klein	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1800'S, 1800'E At top prod. interval reported below At total depth				9. WELL NO. 18	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL OR WILDCAT So. Blanco Pictured Cliffs & Otero Chacra Ext.	
15. DATE SPURRED 9-25-72				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 34, T-26-N, R-6-W NMPM	
16. DATE T.D. REACHED 9-30-72				12. COUNTY OR PARISH Rio Arriba	
17. DATE COMPL. (Ready to prod.) 1-4-73				13. STATE New Mexico	
18. ELEVATIONS (DF, RSE, RT, GR, ETC.)* 6687' GL				19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 3887'		21. PLUG, BACK T.D., MD & TVD 3877'		22. IF MULTIPLE COMPL., HOW MANY* 2	
23. INTERVALS DRILLED BY P-3887'				24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2858-78'(Pictured Cliffs) 3748-3852'(Chacra)	
25. WAS DIRECTIONAL SURVEY MADE no				26. TYPE ELECTRIC AND OTHER LOGS RUN IES; CDL-GR; 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	Cementing Record
9 5/8"	32.3#	133'	13 3/4"	142 cu. ft.	
2 7/8"	6.4#	2977'	8 3/4" & 6 3/4"	355 cu. ft.	
2 7/8"	6.4#	3887'	8 3/4" & 6 3/4"	304 cu. ft.	
29. LINER RECORD				30. TUBING RECORD	
Size	Top (MD)	Bottom (MD)	Sacks Cement*	Screen (MD)	Size
					tubingless
31. PERFORATION RECORD (Interval, size and number) 2858-78' with 30 shots per zone. 3748-58' and 3846-52' with 24 shots per zone				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
				DEPTH INTERVAL (MD)	
				2858-78'	
				3748-3852'	
				AMOUNT AND KIND OF MATERIAL USED	
				30,000#sand; 30,400 gal. water	
				25,000#sand; 25,000 gal. water	
33. PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing			WELL STATUS (Producing or shut-in) shut in
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.
1-4-73	3	3/4"			
FLOW. TUBING PRESS.		CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.
PC-684 SF Ch-692 SF				PC-1078 AOF Ch-1221 AOF	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)				TEST WITNESSED BY L. E. Mabe	
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 <u>4/6/1973</u>		TITLE <u>Petroleum Engineer</u>		DATE <u>April 12, 1973</u>	

\*(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.

**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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38.	GEOLOGIC MARKERS	TOP	
						MEAS. DEPTH	TRUE VERT. DEPTH
					NAME		
					Pictured Cliffs	2856'	
					Chacra	3740'	