

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

Supron Energy Corporation

3. ADDRESS OF OPERATOR

P. O. Box 808, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 1600'/South line and 790'/East line.

At top prod. interval reported below Same as above.

At total depth Same as above.

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED 9/27/78	16. DATE T.D. REACHED 10/10/78	17. DATE COMPL. (Ready to prod.) 1/23/79	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 7195 Gr.	19. ELEV. CASINGHEAD 7195
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20. TOTAL DEPTH, MD & TVD 8337	21. PLUG, BACK T.D., MD & TVD 8275	22. IF MULTIPLE COMPL., HOW MANY* Two	23. INTERVALS DRILLED BY →	ROTARY TOOLS 0 - 8337	CABLE TOOLS 0
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24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Basin Dakota. Top 8096 ft. to 8250 ft.

26. TYPE ELECTRIC AND OTHER LOGS RUN

G. R. Induction - Density

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	AMOUNT PULLED
10-3/4"	32.75#	266	13-3/4"	250 sx	None
7"	23.00	4125	8-3/4"	200 sx	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
4-1/2"	3964	8337	600		2-1/16"	8074	8060

31. PERFORATION RECORD (Interval, size and number)

Basin Dakota: Perforations size 0.42"
8096' to 8102' - 4 perforations 8108-8114'
4 perforations 8196' to 8210' 7 perforations
8244 to 8250' 4 perforations.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
8096' - 8250'	750 Gls. of 15% HCL Acid 40,000 gls of H ₂ O pad. 89,000 gls of crosslink polymer gel & 152,000# 20-40 sand.

33.*

PRODUCTION

DATE FIRST PRODUCTION _____ PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) _____ WELL STATUS (Producing or shut-in) **Shut-in**

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
1/23/79	3	3/4"	→	-0-	114	-0-	-0-
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	DIL. GRAVITY-REL. (WGR.)	
67	PKR	→	-0-	910	-0-	-0-	-0-

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

vented

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing information is complete and correct as determined from all available records

SIGNED

Rudy D. Motto

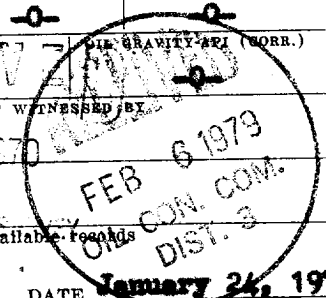
TITLE

Area Superintendent

DATE

January 24, 1979

*(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:				38. GEOLOGIC MARKERS		
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.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo		3490	water			
Fruitland	3615	3750	water			
Pictured Cliffs	3862	3950	gas			
Mesa Verde	5506	6270	gas			
Gallup	7226	7930	dry			
Dakota	8068		gas			