

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

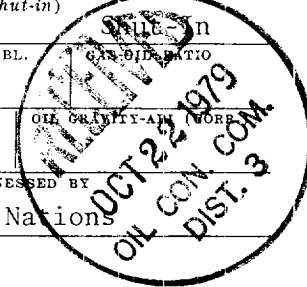
Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL:		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 Exploration Company									
3. ADDRESS OF OPERATOR Box 289, Farmington, New Mexico 87401									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1180'S, 1740'W At top prod. interval reported below At total depth									
14. PERMIT NO.					DATE ISSUED				
15. DATE SPUDDED 8-22-79					16. DATE T.D. REACHED 8-28-79				
17. DATE COMPL. (Ready to prod.) 10-11-79					18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6839' GL				
20. TOTAL DEPTH, MD & TVD 3470'					21. PLUG, PACK T.D., MD & TVD 3461'				
22. IF MULTIPLE COMPL., HOW MANY*					23. INTERVALS DRILLED BY → 0-3570'				
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3339-3373' (PC)					25. WAS DIRECTIONAL SURVEY MADE no				
26. TYPE ELECTRIC AND OTHER LOGS RUN IEL; 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	
8 5/8"		24#		125'		12 1/4"		106 cf.	
2 7/8"		6.4#		3470'		6 3/4" & 7 7/8"		212 cf.	
29. LINER RECORD									
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)	
30. TUBING RECORD									
SIZE		DEPTH SET (MD)		PACKER SET (MD)					
TUBINGLESS COMPLETION									
31. PERFORATION RECORD (Interval, size and number) 3339, 3340, 3357, 3361, 3365, 3369, 3373' W/1 SPZ									
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.									
DEPTH INTERVAL (MD)					AMOUNT AND KIND OF MATERIAL USED				
3339-3373'					31,000#sd, 36,500 gal. wtr.				
33.* PRODUCTION									
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping size and type of pump) Flowing						WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 10-11-79		HOURS TESTED 3 hrs.		CHOKE SIZE 3/4 variable →		PROD'N. FOR TEST PERIOD OIL—BBL. 2701		GAS—MCF. WATER—BBL.	
FLOW. TUBING PRESS.		CASING PRESSURE SI 975		CALCULATED 24-HOUR RATE →		OIL—BBL.		GAS—MCF. WATER—BBL.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)								TEST WITNESSED BY L. Nations	
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>A. D. Bliss</u>		TITLE <u>Drilling Clerk</u>				DATE <u>October 12, 1979</u>			

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

U. S. GEOLOGICAL SURVEY
DURANGO, COLO.



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.), formations 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 3c.

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	NAME	MEAS. DEPTH
			TRUE VERT. DEPTH
		P.C.	3313'