

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										
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico										
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1090' S, 825' W At top prod. interval reported below At total depth										
14. PERMIT NO.					DATE ISSUED					
15. DATE SPUDDED 10-29-66										
16. DATE T.D. REACHED 11-12-66										
17. DATE COMPL. (Ready to prod.) 12-8-66										
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 7431' GL										
19. ELEV. CASINGHEAD										
20. TOTAL DEPTH, MD & TVD 8749'				21. PLUG, BACK T.D., MD & TVD 8692'				22. IF MULTIPLE COMPL., HOW MANY*		
23. INTERVALS DRILLED BY 0-8749				ROTARY TOOLS		CABLE TOOLS				
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 8487-8664 (DK)									25. WAS DIRECTIONAL SURVEY MADE	
26. TYPE ELECTRIC AND OTHER LOGS RUN I-ES, FDC - GR, GG, Temperature Survey									27. WAS WELL CORED	
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#		330'		15"		240 sks.		
7 5/8"		26.40#		4577'		9 7/8"		165 sks.		
5 1/2"		17# & 15.5#		8432		6 3/4"		295 sks.		
29. LINER RECORD										30. TUBING RECORD
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)			
4"	8329'	8749'	100		2 3/8"	8631'				
31. PERFORATION RECORD (Interval, size and number)										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
8487-91', 8504-08', 8594-8602', 8648-64' w/16 SPZ					DEPTH INTERVAL (MD)					AMOUNT AND KIND OF MATERIAL USED
					8487-8664					46,250 gal. wtr., 46,000# sand
										250 gal. acid
33.*										
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pump, etc.—size and type of pump)								
		Flowing								
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO			
2-8-66	3	3/4"								
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)				
SI 2514	SI 2537			3753 MCF/D						
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)										TEST WITNESSED BY D. R. Roberts
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 F. H. WOOD				TITLE		Petroleum Engineer		
						DATE		Dec. 27, 1966		

*(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
				Ojo Alamo	3510
				Kirtland	3850
				Fruitland	4042
				Pictured Cliff	4303
				Cliff House	5255
				Point Lookout	6466
				Gallup	7436
				Greenhorn	8384
				Graneros	8447
				Dakota	8592