

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

(See other instructions on reverse side)

Budget Form No. 42-R255.5

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____				5. LEASE DESIGNATION AND SERIAL NO. Contract 93	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				6. IF INDIAN, ALIEN, OR TRIBE NAME Jicarilla Apache	
2. NAME OF OPERATOR Northwest Pipeline Corporation				7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR PO Box 90, Farmington, New Mexico 87401				8. FARM OR LEASE NAME Jicarilla 93	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1450' FNL & 1055' FWL				9. WELL NO. 7	
At top prod. interval reported below same				10. FIELD AND POOL, OR A RELOCATED Gavilan Pictured Cliffs	
At total depth same				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec 32 T27N R3W	
14. PERMIT NO. _____		DATE ISSUED _____		12. COUNTY OR PARISH Rio Arriba	13. STATE New Mexico
15. DATE SPUNDED 9-26-77	16. DATE T.D. REACHED 10-24-77	17. DATE COMPL. (Ready to prod.) 12-23-77	18. ELEVATIONS (DP, RKB, RT, GR, ETC.)* 7117' GR	19. CASINGHEAD -	
20. TOTAL DEPTH, MD & TVD 4118'	21. PLUG BACK T.D., MD & TVD 4091'	22. IF MULTIPLE COMPL., HOW MANY* _____	23. INTERVALS DRILLED BY → all	ROTARY TOOLS all	CABLE TOOLS -
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Pictured Cliffs; 3888' to 3846'					25. WAS DIRECTIONAL SURVEY MADE no
26. TYPE ELECTRIC AND OTHER LOGS RUN I-ES, Gamma Ray Density, CCL					27. WAS WELL CORED no
28. CASING RECORD (Report all strings set in well)					
CASING SIZE 8 5/8"	WEIGHT, LB./FT. 24#	DEPTH SET (MD) 146'	HOLE SIZE 12 1/4"	CEMENTING RECORD 90 sks	AMOUNT PULLED / bbls
2 7/8"	6.4#	4091'	6 3/4"	130 sks	-
29. LINER RECORD			30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number)			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
3888	3904	3922	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	
3892	3908	3928	3388' to 3946'	Pumped 500 gal 15% HCl. Dropped 20 balls. Fraced w/ 50,000# 10/20 sd @ 1 ppq in 50,000 gal slick water.	
3896	3912	3946			
3900	3918				
total 11 shots					
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 12-23-77	HOURS TESTED 3 hrs	CHOKE SIZE 0.750"	PROD'N. FOR TEST PERIOD →	OIL—BBL. -	GAS—MCF. CV 1015
FLOW. TUBING PRESS. -	CASING PRESSURE 74 psig	CALCULATED 24-HOUR RATE →	OIL—BBL. -	GAS—MCF. AOF 1028	WATER—BBL. -
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Waiting on pipeline connection					
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 _____		TITLE Production Clerk		DATE Jan 10, 1978	

*(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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliffs			SS. lt gry, fn med gr s & p, ws & r, sl calc.	Pictured Cliffs	3866'	same