

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-067988	
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 <input type="checkbox"/>		6. IF INDIAN ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR CURTIS J. LITTLE		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 2487 Farmington NM 87401		8. FARM OR LEASE NAME FOSTER	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1810' FSL & 790' FBL At top prod. interval reported below At total depth same		9. WELL NO. #1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Sec. Blanco PC	
15. DATE SPUDDED 1-9-82		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 17-T26N-R7W	
16. DATE T.D. REACHED 1-16-82		12. COUNTY OR PARISH Rio Arriba	
17. DATE COMPL. (Ready to prod.) 1-30-82		13. STATE NM	
18. ELEVATIONS (DF, REB, RT, GR, ETC.) 6717' GL		19. ELEV. CASINGHEAD 6717'	
20. TOTAL DEPTH, MD & TVD 2887		21. PLUG, BACK T.D., MD & TVD 2872	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY ROTARY TOOLS 10-2887 CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2742-76 PC		25. WAS DIRECTIONAL SURVEY MADE yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN IES GR-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
7'	23	125/45'	9-7/8
2-7/8	6.4	2882	5-1/4
CEMENTING RECORD		AMOUNT PULLED	
60 sx Surfaced		none	
275 sx		none	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number) 2742-76 w/17 24 spacing			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
2742-76		Acidized w/500 gals. 7 1/2%	
HCL & 25 ball sealers.		FRAC w/70% quality foam, 234 MCF Nitrogen,	
246 bbls KCL wtr & 39,000# 10-20 sd.			
33.* PRODUCTION			
DATE FIRST PRODUCTION 1-30-82		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) GWSI WOPL			
DATE OF TEST 1-30-82	HOURS TESTED 3	CHOKE SIZE 3/4	PROD'N. FOR TEST PERIOD →
OIL—BBL. 0	GAS—MCF. 98.75	WATER—BBL. 0	GAS-OIL RATIO -
FLOW. TUBING PRESS. none	CASING PRESSURE 66 psi	CALCULATED 24-HOUR RATE →	OIL—BBL. 0
GAS—MCF. 790	WATER—BBL. 0	OIL GRAVITY-API (CORR.) -	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented to be sold		TEST WITNESSED BY Joe Elledge	
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 Curtis J. Little		TITLE OPERATOR	
DATE 2-2-82		FEB 17 1982	

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

NMOCG

FARMINGTON DISTRICT  
Elledge

# 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 POSITIVE ZONES: SHOW ALL IMPORTANT ZONES OF POSITIVITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION (SEI), TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
LOCATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliffs	2733	2776	Dry gas.	Ojo Alamo Kirtland Fruitland Pictured Cliffs	1995 2145 2582 2733	same