SUBMIT IN DUPLICATE* UNITED STATES DEPARTMENT OF THE INTERIOR

(See other in-

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

structions on reverse side) 5.

LEASE	DESIGNATION	AND	SERIAL	1

	GE	DLOGICA	L SU	RVEY				SF 078	3012	
WELL CO	MPLETION O	R RECOM	PLETI	ON F	REPORT	AN[LOG	* 6. IF INDIAN,	ALLOTTE	EE OR TRIBE NAME
								7. UNIT AGRE	EMENT N	AME
b. TYPE OF COM			Di	—	Other		3	Huerfar	io Un:	it
WELL	WORK DEEP-	PLUG BACK	DIFF RESV	R. 🗌	Other		- 3			
									10 Un	it
		Company				-	Δ			
		¥,	0740		بال در	:D	v			
					- EIV	om ent			•	
At surface	1650'N 1650	turty and in acc	columnce	REY	10 °	181	*/ \			
	•	"	1	N	AN 30 "	5		OR AREA	•	
IB. TYPE OF WELL: WELL WELL WELL DAY Other B. TYPE OF COMPLETION: NEW OVER NOTE BEEF BEEK DIFF. Other SERVICE OF COMPLETION: NEW OVER SERVICE BEEF BEEK DIFF. Other EI PASO NATURAL Gas Company 3. Audered of OFERATOR EI PASO NATURAL Gas Company 3. Audered of OFERATOR P.O. BOX 289, Farmington, NM 87401 4. LOCATION OF WELL (Report location electry and in accordance before requirements). At outlade 1650'N, 1650'W At top prod. interval reported below At total depth At total depth 14. ARRING NO AUTHOR SERVICE 15. DATE SPECIAL SURVEY. At total depth 16. DATE T.D. RELICIDE 17. DATE CONFL. (Ready to prod.) 18. ELEVATIONS (DF. REE. BET. SERVICE). 17. DATE SPECIAL SURVEY. At total depth 18. SELVATIONS (DF. REE. BET. SERVICE). 19. THE SELVATIONS (DF. REE. BET. SERVICE). 19. THE SELVATIONS (DF. REE. BET. SERVICE). 10. AND TOTAL SERVICE. 10. AND T										
SET SOUTH SOUTH SEED S										
			14. Æ	MIT NO	ARWIII	DATE 1	SSUED		R	13. STATE
										New Mexic
	1			Keady to	p proa.) 18.		, ,	REB, RT, GR, ETC.)*	19. ELE	V. CASINGHEAD
	·	<u> </u>	5-80 n 1322	IF MUL	TIPLE COMPL	659		VALS ROTARY TOOL	.s	CABLE TOOLS
				HOW M	ANY*			ED BY	- 1	
			BOTTOM,	NAME (3	ID AND TVD)*			10-0/94		WAS DIRECTIONAL
									8	SURVEY MADE
565	50-5910' (Gal	lup)							No	o
26. TYPE ELECTRIC A	ND OTHER LOGS RUN	1,							27. WAS	WELL CORED
Ind. E	S; Sonic								No	o
		 				set in				
		DEPTH SET	(MD)	l			CEME	NTING RECORD	— <i></i>	AMOUNT PULLED
	_	-!- 							_	
									-	
4 1/2"	10.5#	2936,		6 1/	4''		1// cu.	it.		
29.	LIN	ER RECORD				<u> </u>	30.	TUBING RECO	RD	
SIZE	TOP (MD) BOT	TOM (MD) S	ACKS CE	MENT*	SCREEN (MI	D)	SIZE	DEPTH SET (MI) P	ACKER SET (MD)
					-		2 3/8"	5896'		
650-5662,5674	-5686,5698-57	06,5762-5	5776,5	5784-	32.	ACI	D, SHOT, I	FRACTURE, CEMENT	SQUEE	ZE, ETC.
					1					
I/2 SPZ.										
						црре	= - 4	1,500 gal. 01	.1 G 2	+3,000π Sα,
33.*				PRGI	DUCTION					
DATE FIRST PRODUCT	ION PRODUCTIO	N METHOD (Flo	owing, go	is lift, pi	umping—size	and ty	pe of pump) WELL 8	STATUS (Producing or
	No A	fter Frac	Gaug	e Plu	g Back t	o Ga	llup 0			Shut-In
DATE OF TEST	HOURS TESTED	CHOKE SIZE			OIL-BBL.		GAB-MCF	WATER-BBL.	GA	S-OIL RATIO
										
			OILE	BBL.		MCF.		f 1	OIL GRAV	VITY-API (CORR.)
	112 (OMM)									
34. Disposition of G	AS (Soid, ased for face	,					1	· · · · · · · · · · · · · · · · · · ·		tinaton
35. LIST OF ATTACH	MENTS								Traire	Lingcon
								A		y kan a kanan Milian K
36. I hereby certify	that the foregoing ar	d attached info	ormation	is comp	lete and corre	ect as	determined	from all available re	cords	
	1 D. R.	200			Drillin	a C1	lork	: -	Ton-	102
SIGNED Z	- In		_ TIT	rle	DITITIN	<u>g</u> (.)	CIK	DATE	<u>Jant</u>	<u>1ary 20, 19</u> 8

NSTRUCTIONS

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 II not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, sample and core analysis, all types electric, etc.), formatically available logs (drillers, sample and core analysis, all types electric, etc.)

tion and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations.

or Federal office for specific instructions.

should be listed on this form, see item 35.

Hem 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

All attachments

interval, or intervals, top(s), bottom(s) and name(s) (i.e., any) are considered, or interval, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Hem 29: "Sacks Coment": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Here 29: "Sacks Coment": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. Hem 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.

Hems 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,

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		тор	P
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Fruitland	1701'	
				Pic. Cliffs	2045	
				C.H.	3550'	
				Men.	3643'	
				P.L.	4563'	
				Mancos	4563'	
- •				Gallup	5637'	,
				Dakota	6564'	
			`			
			•			
					-	
						-

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