

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

SOUTHERN UNION PRODUCTION COMPANY

3. ADDRESS OF OPERATOR

FARMINGTON,

P. O. Box 808, NEW MEXICO

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 890 FEET FROM SOUTH LINE & 1850 FEET FROM EAST LINE.

At top prod. interval reported below SAME AS ABOVE

At total depth SAME AS ABOVE

14. PERMIT NO.

DATE ISSUED

15. DATE SPUNDED

1/24/64

16. DATE T.D. REACHED

1/28/64

17. DATE COMPL. (Ready to prod.)

2/3/64

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

6263 DERRICK FLOOR

19. ELEV. CASINGHEAD

6254

20. TOTAL DEPTH, MD & TVD

2270 FT.

21. PLUG, BACK T.D., MD & TVD

2231 FT.

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

→

0-2270

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

2064 - 2162 PICTURED CLIFFS

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

ELECTRIC LOG - GAMMA-RAY CORRELATION LOG

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	AMOUNT PULLED
8-5/8"	24.0#	88 FT.	12-1/2"	80 SACKS	
4-1/2"	9.50#	2264 FT.	7-7/8"	150 SACKS	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1"	2058	

31. PERFORATION RECORD (Interval, size and number)

PERF 1 SHOT/FT. 2064-2076, 2084, 2096,
2104, 2110, 2155, 2158, 2162.
TOTAL OF 19 HOLES. SCHLUMBER CRACK JET
0.48 HOLE SIZE.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2064-2162	SAND WATER FRAC W/40,000# 10-20 SAND AND 25,200 GALLONS OF WATER AND 20 TONS OF CARBON DIOXIDE

33.*

PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in)

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
2/16/64	3 HRS.	3/4"	→		228		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
158	142	→		1829			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

VENTED

TEST WITNESSED BY

B. N. PHILLIPS

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

GILBERT D. NOLAND, JR.

OIL CON. COM.
DIST. 3

DRILLING SUPERINTENDENT

DATE JULY 27, 1964

*(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 38, 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	TOP TRUE VERT. DEPTH
				WASATCH	SURF	
				KIRTLAND	1405	
				FRUITLAND	1845	
				PICTURED CLIFFS	2060	
				LEWIS	2250	