

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions 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 ☐		5. LEASE DESIGNATION AND SERIAL NO. SF 078430	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Southern Union Production Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 808, Farmington, New Mexico 87401		8. FARM OR LEASE NAME Henson "A"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1565 ft. from the South line & 1140 ft. from the West line. At top prod. interval reported below Same as above. At total depth Same as above.		9. WELL NO. 4	
14. PERMIT NO.		13. STATE New Mexico	
15. DATE SPUNDED 8/1/67		12. COUNTY OR PARISH San Juan	
16. DATE T.D. REACHED 8/14/67		11. SEC. T. R., M., OR BLOCK AND SURVEY OR AREA Sec. 10, T-26N, R-2E, N.M.P.M.	
17. DATE COMPL. (Ready to prod.) 8/26/67		10. FIELD AND POOL, OR WILDCAT Begin Dakota	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6939 R.K.B.		11. SEC. T. R., M., OR BLOCK AND SURVEY OR AREA Sec. 10, T-26N, R-2E, N.M.P.M.	
20. TOTAL DEPTH, MD & TVD 7383 MD & TVD		19. ELEV. CASINGHEAD 6939	
21. PLUG, BACK T.D., MD & TVD 7349 MD & TVD		23. INTERVALS DRILLED BY 0-7383	
22. IF MULTIPLE COMPL., HOW MANY*		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7115-7322 MD & TVD (Dakota)	
26. TYPE ELECTRIC AND OTHER LOGS RUN E.S. Induction, Density, Gamma Ray Correlation, Cement Bond		25. WAS DIRECTIONAL SURVEY MADE No	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 1 shot per ft. 7266-7282, 7292-7304, 7316-7322, 7115-7122, 7128-7134, 7180-7202.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 7266-7322 7115-7202 AMOUNT AND KIND OF MATERIAL USED 35,000# sand, 1000# glass beads, & 41,750 gal. 0.5% HCL water. 55,000# sand, 1000# glass beads, & 80,000 gal. 0.5% HCL water.	
33.* PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in) Start-in		34. DISPOSITION OF GAS (Solid, used for fuel, vented) Vented	
35. LIST OF ATTACHMENTS		36. I hereby certify that the foregoing and attached are true, complete and correct as determined from all available records	
SIGNED Gilbert D. Noland, Jr.		DATE October 16, 1967	

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

Original signed by
GILBERT D. NOLAND, JR.

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. These 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. All attachments should be listed on this form, see item 35.

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 20 interval, or intervals; top(s), bottom(s) and name(s). (see instructions)

Item 29: "Sacks Cement": Attached supplemental records for this interval are as follows:

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 23 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	
				Base Ojo Alamo Pictured Cliffs Cliff House Point Lookout Callup Base Greenhorn Detona	2153 2700 4353 5058 6276 7075 7914		