

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

(See other instructions on reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL:		OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐		7. UNIT AGREEMENT NAME	
b. TYPE OF COMPLETION:		NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		8. FARM OR LEASE NAME	
2. NAME OF OPERATOR		El Paso Natural Gas Company		Day B	
3. ADDRESS OF OPERATOR		Box 990, Farmington, New Mexico - 87401		9. WELL NO.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 801'N, 1190'E		3	
At top prod. interval reported below				10. FIELD AND POOL, OR WILDCAT	
At total depth				Basin Dakota	
14. PERMIT NO.		DATE ISSUED		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA	
				Sec. 7, T-27-N, R-8-W	
				N.M.P.M.	
15. DATE SPUDDED		16. DATE T.D. REACHED		12. COUNTY OR PARISH	
10-8-68		10-24-68		San Juan	
17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*		13. STATE	
11-12-68		6246' OL		New Mexico	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD	
		6966'		6954'	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS	
		0-6967'		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*				25. WAS DIRECTIONAL SURVEY MADE	
6785 - 6935' (Dakota)				No	
26. TYPE ELECTRIC AND OTHER LOGS RUN				27. WAS WELL CORED	
I-EL, Density, Temp. Survey				No	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		CEMENTING RECORD	
8 5/8"		24#		195 Sks.	
4 1/2"		10.5#		600 Sks.	
29. LINER RECORD		30. TUBING RECORD			
SIZE		TOP (MD)		SIZE	
		BOTTOM (MD)		DEPTH SET (MD)	
		SACKS CEMENT*		2 3/8"	
		SCREEN (MD)		6777'	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
6785-6805, 6872-82, 6895-6908, 6920-35' w/20 SPZ		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
		6785-6935'		65,000 gal. water, 65,000# sand	
				600 gal. acid	
33.* PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in)	
		Flowing		Shut In	
DATE OF TEST		HOURS TESTED		CHOKE SIZE	
11-12-68		3		3/4"	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE	
SI 2009		SI 1976			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY			
		C. R. Wagner			
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 <u>Carl E. Matthews</u> TITLE <u>Petroleum Engineer</u> DATE <u>11-15-68</u>					

***(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, whether they 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 32 below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all current 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 of 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:			38. GEOLOGIC MARKERS	
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				
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH
			TRUE VERT. DEPTH	
			Pictured Cliffs	2367
			Mesa Verde	4048
			Point Lookout	4663
			Gallup	5845
			Greenhorn	6615
			Graneros	6663
			Dakota	6782