P&2	A						
	•						
				TIOMY ON			~
33.*			PRO.	DUCTION			
DATE FIRST PRODUCT	ION PRODUCT	ION METHOD (Flo	wing, gas lift, p	umping—size and t	ype of pump)	WELL STA shut-in	rds Broducing or
DATE OF TEST P&A	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL-BBL.	GAS-MCF.	WATER—BBL.	1978 BATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS-MCF.	WATE	I OIL PUI	GRANTYNAPI (CORR.)
34. DISPOSITION OF G	AS (Sold, used for fu	el, vented, etc.)				TEST WITNESSON	DIPA
35. LIST OF ATTACH	MENTS						

Engineer

10-26-76

DATE _

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

TITLE _

uaan

omasi

SIGNED

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 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 is not regulations. All attachments are the form of the completion of the extent required by applicable Federal and/or State laws and regulations. All attachments

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

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, tems 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.

Hem 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.

Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

Log Tops Ojo Alamo 258' Kirtland 390' Pictured Cliffs 1260'	37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES O DEPTH INTERVAL TESTED, CUSH FORMATION TOP	MARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, PLOWING TOP ROTATION TOP ROTTOM	USED, TIME TOOL O	TESTHEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING PENN, PLOWING AND SHUT-IN PRESSURES, AND RECOVERIES DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC	GEOLOGIC MARKERS TOP MEAS. DEPTH	TRUE VERT, DEPTH
Cliffs Cliffs					Log Tops		
Cliffs					Ojo Alamo	258"	
Cliffs					Kirtland	3901	
						1260'	
	**************************************	1					1