

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 ☐		5. LEASE DESIGNATION AND SERIAL NO. SF - 078430																			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. ESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A																			
2. NAME OF OPERATOR Supron Energy Corp. % John H. Hill, et al		7. UNIT AGREEMENT NAME N/A																			
3. ADDRESS OF OPERATOR Suite 020, Kysar Building 300 W. Arrington, Farmington, New Mexico 87401		8. FARM OR LEASE NAME Newsom "A"																			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1010' FSL & 790' FWL (SW SW) At top prod. interval reported below At total depth		9. WELL NO. 11																			
14. PERMIT NO. DATE ISSUED JUN 5 1981		10. FIELD AND POOL, OR WILDCAT Ballard Pictured Cliffs/ Blanco Mesa Verde																			
15. DATE SPUDDED 4/6/81		11. SEC. T., R., N., OR BLOCK AND SURVEY OR AREA Sec. 3 T26N R8W																			
16. DATE T.D. REACHED 4/10/81		12. COUNTY OR PARISH San Juan																			
17. DATE COMPL. (Ready to prod.) 5/7/81		13. STATE New Mexico																			
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6925' GR		19. ELEV. CASINGHEAD 6927' GR																			
20. TOTAL DEPTH, MD & TVD 3100' MD		21. PLUG, BACK T.D., MD & TVD 3013																			
22. IF MULTIPLE COMPL., HOW MANY* Single		23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS 3100'																			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2878' - 2920' Pictured Cliffs		25. WAS DIRECTIONAL SURVEY MADE No																			
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Correlation CCL		27. WAS WELL CORED No																			
28. CASING RECORD (Report all strings set in well)																					
<table border="1"><thead><tr><th>CASING SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>CEMENTING RECORD</th><th>AMOUNT PULLED</th></tr></thead><tbody><tr><td>8 5/8"</td><td>24#</td><td>216'</td><td>12 1/4"</td><td>200 sx. Class "B"</td><td>-0-</td></tr><tr><td>2 7/8"</td><td>6.4#</td><td>3043'</td><td>7 7/8"</td><td>925 sx. 50/50 Poz.</td><td>-0-</td></tr></tbody></table>				CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	8 5/8"	24#	216'	12 1/4"	200 sx. Class "B"	-0-	2 7/8"	6.4#	3043'	7 7/8"	925 sx. 50/50 Poz.	-0-
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED																
8 5/8"	24#	216'	12 1/4"	200 sx. Class "B"	-0-																
2 7/8"	6.4#	3043'	7 7/8"	925 sx. 50/50 Poz.	-0-																
29. LINER RECORD																					
<table border="1"><thead><tr><th>SIZE</th><th>TOP (MD)</th><th>BOTTOM (MD)</th><th>SACKS CEMENT*</th><th>SCREEN (MD)</th></tr></thead><tbody></tbody></table>				SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)													
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)																	
30. TUBING RECORD																					
<table border="1"><thead><tr><th>SIZE</th><th>DEPTH SET (MD)</th><th>PACKER SET (MD)</th></tr></thead><tbody></tbody></table>				SIZE	DEPTH SET (MD)	PACKER SET (MD)															
SIZE	DEPTH SET (MD)	PACKER SET (MD)																			
31. PERFORATION RECORD (Interval, size and number) 2878, 80, 82, 84, 86, 88, 90, 92, 94, 2904, 06, 20 12 holes with Ceramic Strip																					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. <table border="1"><thead><tr><th>DEPTH INTERVAL (MD)</th><th>AMOUNT AND KIND OF MATERIAL USED</th></tr></thead><tbody><tr><td>2878 - 2920</td><td>1000 gals. 15% HCL Acid</td></tr><tr><td></td><td>45604 gals 70% Quality Foam</td></tr><tr><td></td><td>45000# 10/20 Sand</td></tr><tr><td></td><td>497,273 SCF Nitrogen</td></tr></tbody></table>				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	2878 - 2920	1000 gals. 15% HCL Acid		45604 gals 70% Quality Foam		45000# 10/20 Sand		497,273 SCF Nitrogen								
DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED																				
2878 - 2920	1000 gals. 15% HCL Acid																				
	45604 gals 70% Quality Foam																				
	45000# 10/20 Sand																				
	497,273 SCF Nitrogen																				
33.* PRODUCTION																					
<table border="1"><thead><tr><th>DATE FIRST PRODUCTION</th><th>PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)</th><th>WELL STATUS (Producing or shut-in)</th></tr></thead><tbody><tr><td></td><td>Flowing</td><td>Shut-In</td></tr></tbody></table>				DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)		Flowing	Shut-In												
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)																			
	Flowing	Shut-In																			
<table border="1"><thead><tr><th>DATE OF TEST</th><th>HOURS TESTED</th><th>CHOKE SIZE</th><th>PROD'N. FOR TEST PERIOD</th><th>OIL—BBL.</th><th>GAS—MCF. /D</th><th>WATER—BBL.</th><th>GAS-OIL RATIO</th></tr></thead><tbody><tr><td>5/7/81</td><td>3 hrs.</td><td>.75</td><td>→</td><td></td><td>311</td><td></td><td></td></tr></tbody></table>				DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF. /D	WATER—BBL.	GAS-OIL RATIO	5/7/81	3 hrs.	.75	→		311				
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF. /D	WATER—BBL.	GAS-OIL RATIO														
5/7/81	3 hrs.	.75	→		311																
<table border="1"><thead><tr><th>FLOW. TUBING PRESS.</th><th>CASING PRESSURE</th><th>CALCULATED 24-HOUR RATE</th><th>OIL—BBL.</th><th>GAS—MCF.</th><th>WATER—BBL.</th><th>OIL GRAVITY-API (CORR.)</th></tr></thead><tbody><tr><td></td><td>14</td><td>→</td><td></td><td>312</td><td></td><td></td></tr></tbody></table>				FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		14	→		312						
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)															
	14	→		312																	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented																					
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: _____ TITLE: Drilling/Prod. Manager																					
DATE: JUN 9 1981 5/19/81																					
FARMINGTON DISTRICT																					
BY: _____																					

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

NMOCC

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. 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:				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 PRESSURE, AND RECOVERIES				NAME	TOP	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	1740		Water			
Kirtland	2148		Water			
Fruitland	2410		Water			
Pictured Cliff	2810		Gas			
Lewis	2925		Shale			