

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 Sharp	
2. NAME OF OPERATOR El Paso Natural Gas Company		9. WELL NO. 6	
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401		10. FIELD AND POOL, OR WILDCAT So. Blanco Pictured Cliffs Ext.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1840'S, 1740'E At top prod. interval reported below At total depth		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 18, T-28-N, R-8-W NMPM	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 12-7-72		16. DATE T.D. REACHED 12-9-72	
17. DATE COMPL. (Ready to prod.) 4-23-73		18. ELEVATIONS (DF, REB, BT, GR, ETC.)* 5778'GL	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 2275'	
21. PLUG BACK T.D., MD & TVD 2264'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		ROTARY TOOLS 0-2275'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2160-2213'(Pictured Cliffs)		25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN IEL; CDL-GR; Temp. Survey		27. WAS WELL CORED	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE		WEIGHT, LB./FT.	
DEPTH SET (MD)		HOLE SIZE	
CEMENTING RECORD		AMOUNT CEMENTED	
8 5/8"		24.0#	
138'		12 1/4"	
130 cu.ft.		2 7/8"	
6.4#		2275'	
7 7/8"		6 3/4"	
478 cu.ft.			
29. LINER RECORD			
TUBING RECORD		30. TUBING RECORD	
SIZE		DEPTH SET (MD)	
TOP (MD)		BOTTOM (MD)	
SACKS CEMENT*		SCREEN (MD)	
tubingless			
31. PERFORATION RECORD (Interval, size and number) 2160-80' and 2198-2213' with 30 shots per zone			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
2160-2213'		32,000#sand, 33,280 gal. water	
33. PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
WELL STATUS (Producing or shut-in)		shut in	
DATE OF TEST		HOURS TESTED	
CHOKE SIZE		PROD'N. FOR TEST PERIOD	
OIL—BBL.		GAS—MCF.	
WATER—BBL.		GAS-OIL RATIO	
4-23-73		3	
3/4"			
tubingless		SI 762	
CALCULATED 24-HOUR RATE		OIL—BBL.	
GAS—MCF.		WATER—BBL.	
1506 AOF		OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
TEST WITNESSED BY D. Norton			
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	
Petroleum Engineer		DATE	
April 30, 1973			

*** (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 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: 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
				Pictured Cliffs	2154'	