

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 _____		7. UNIT AGREEMENT NAME	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		8. FARM OR LEASE NAME Aztec	
2. NAME OF OPERATOR Southland Royalty Company		9. WELL NO. #7E	
3. ADDRESS OF OPERATOR P.O. Drawer 570, Farmington, NM 87401		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1540' FSL & 930' FWL At top prod. interval reported below At total depth		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 14, T28N, R11W	
14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH San Juan	
15. DATE SPUDDED 9-22-80		13. STATE NM	
16. DATE T.D. REACHED 9-30-80		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5581' GR	
17. DATE COMPL. (Ready to prod.) 11-16-80		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 6340'		21. PLUG, BACK T.D., MD & TVD 6295'	
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* DK: 6070'-6183'		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN IES, GR-Density		27. WAS WELL LOGGED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8-5/8"	24#	221'	12-1/4"
5-1/2"	15.5#	6340'	7-7/8"
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-3/8"	6141'		
31. PERFORATION RECORD (Interval, size and number) DK: 6070', 6117', 24', 31', 38', 45', 52', 83', (8 holes)			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
6070'-6183'		108,822 gals. 30# gel water & 55,000# 20/40 sd.	
33.* PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
		Flowing	
WELL STATUS (Producing or shut-in)		Shut-in	
DATE OF TEST		HOURS TESTED	
1-2-81		3 hrs.	
CHOKE SIZE		PROD'N. FOR TEST PERIOD	
1/2"			
OIL—BBL.		GAS—MCF.	
WATER—BBL.		OIL GRAVITY-API (CORR.)	
FLOW. TUBING PRESS.		CASING PRESSURE	
0		492	
CALCULATED 24-HOUR RATE		OIL—BBL.	
GAS—MCF.		WATER—BBL.	
122 MCF			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
TEST WITNESSED BY			
Tom Wagner			
35. LIST OF ATTACHMENTS			
Sold			

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

SIGNATURE

TITLE District Production Manager

DATE _____

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

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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 33.

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	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	385'				
Fruitland	1338'				
Pictured Cliffs	1590'				
Cliff House	3122'				
Point Lookout	3930'				
Gallup	5167'				
Greenhorn	5940'				
Graneros	6003'				
Dakota	6112'				