

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 080379	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☒ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR El Paso Natural Gas Company		7. UNIT AGREEMENT NAME San Juan 29-6 Unit	
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico		8. FARM OR LEASE NAME San Juan 29-6 Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' N, 990' E At top prod. interval reported below At total depth		9. WELL NO. 12 (OWO)	
14. PERMIT NO.		13. STATE New Mexico	
DATE ISSUED		12. COUNTY OR PARISH Rio Arriba	
15. DATE SPUNDED W/O 10-4-65		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde	
16. DATE T.D. REACHED W/O 10-12-65		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 6, T-29-N, R-6-W N.M.P.M.	
17. DATE COMPL. (Ready to prod.) W/O 10-16-65		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6802' GL	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD Whipstock 6043	
21. PLUG, BACK T.D., MD & TVD C.O. 6020		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY 0-6043		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5490 - 5582' (C.H.) 5911-5994 (P.L.)	
25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN ES, CRI, Temperature Survey	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 5490-98, 5540-48 w/2 BPF; 5564-68, 5578-82 w/4 BPF. 5911-15 w/4 BPF, 5946-54, 5966-74, 5986-94 w/2 BPF. All shots w/3 1/8" S.D.J.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 5490-5582 30,000 gal water, 30,000# sand 5911-5994 59,760 gal water, 60,000# sand	
33. PRODUCTION DATE FIRST PRODUCTION After W/O 11-16-65 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) Producing		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
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 ORGINAL SIGNED E. S. OBERLY TITLE Petroleum Engineer		DATE November 29, 1965	

*(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 of 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) and bottom (s) 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 ZONES:			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Fruitland Pictured Cliff Cliff House Menefee Point Lookout Mancos	3407 3712 5416 5590 5941 6002	