

# EL PASO NATURAL GAS COMPANY DEVIATION REPORT

Name Of Company EL PASO NATURAL GAS COMPANY			Address P.O. BOX 990, FARMINGTON, NEW MEXICO 87401			
Lease San Juan 29-7 Unit	Well No. 110	Unit Letter G	Section 31	Township 29-N	Range 7-W	
Pool Basin Dakota				County San Juan		

**DEPTH**

**DEVIATION**

316'	1/2°
840'	3/4°
1352'	3/4°
1855'	3/4°
2350'	3/4°
2769'	1°
3183'	1°
3650'	1°
4160'	1°
4660'	1°
5169'	1°
5670'	1°
6188'	1°
6665'	1°
7154'	3/4°
7845'	1°



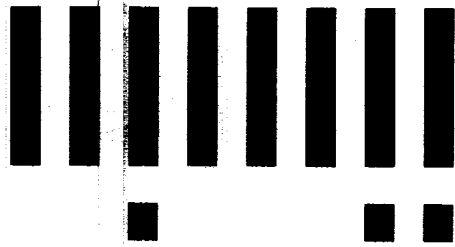
I, the undersigned, certify that I, acting in my capacity as Petroleum Engineer of El Paso Natural Gas Company, am authorized by said Company to make this report; and that this report was prepared by me or under my supervision and directions and that the facts stated therein are true to the best of my knowledge and belief.

*William J. ...*

Subscribed and sworn to before me this 13th day of Oct, 1977

*Josa P. Guises*  
Notary Public in and for San Juan County, New Mexico

My commission expires October 5, 1980



**LTR**



**Job separation sheet**

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG \***

1. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____										5. LEASE DESIGNATION AND SERIAL NO. <b>SF 078503</b>			
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____										6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
2. NAME OF OPERATOR <b>EL PASO NATURAL GAS COMPANY</b>										7. UNIT AGREEMENT NAME <b>San Juan 29-7 Unit</b>			
3. ADDRESS OF OPERATOR <b>BOX 990 FARMINGTON, NEW MEXICO 87401</b>										8. FARM OR LEASE NAME <b>San Juan 29-7 Unit</b>			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface <b>1840'N, 1830'E</b> At top prod. interval reported below At total depth										9. WELL NO. <b>110</b>			
14. PERMIT NO. _____ DATE ISSUED _____										10. FIELD AND POOL, OR WILDCAT <b>Basin Dakota</b>			
15. DATE SPUNDED <b>7/21/77</b> 16. DATE T.D. REACHED <b>8/3/77</b> 17. DATE COMPL. (Ready to prod.) <b>9/26/77</b>										11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA <b>Sec. 31, T-29-N, R-7-W N.M.P.M.</b>			
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* <b>6644' GR</b>										12. COUNTY OR PARISH <b>Rio Arriba</b>			
20. TOTAL DEPTH, MD & TVD <b>7845'</b> 21. PLUG, BACK T.D., MD & TVD <b>7836'</b> 22. IF MULTIPLE COMPL., HOW MANY* _____										13. STATE <b>New Mexico</b>			
23. INTERVALS DRILLED BY _____ ROTARY TOOLS <b>0-7845'</b> CABLE TOOLS _____										19. ELEV. CASINGHEAD			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* <b>7595-7806 (DK)</b>										25. WAS DIRECTIONAL SURVEY MADE <b>No</b>			
26. TYPE ELECTRIC AND OTHER LOGS RUN <b>IL-GR; CDL-GR; AID; Temp. Survey</b>										27. WAS WELL CORED <b>No</b>			
28. CASING RECORD. (Report all strings set in well)										<b>RECEIVED</b> <b>OCT 17 1977</b>			
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD				AMOUNT PULLED	
9 5/8"		32.3#		316'		13 3/4"		377 cu. ft.					
7"		20#		3639'		8 3/4"		266 cu. ft.					
4 1/2"		10.5 & 11.6#		7845'		6 1/4"		645 cu. ft.					
29. LINER RECORD										30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE			
										1 1/2"			
31. PERFORATION RECORD (Interval, size and number) <b>7595, 7601, 7613, 7621, 7693, 7730, 7771, 7791, 7806' w/1 SPZ.</b>										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
										DEPTH INTERVAL (MD)			
										AMOUNT AND KIND OF MATERIAL USED			
										<b>7595-7806'</b>			
										<b>65,000# sand; 66,000 gal. water.</b>			
33. PRODUCTION										<b>RECEIVED</b> <b>OCT 18 1977</b>			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) <b>After Frac. Gauge - 1841 MCF/D</b>										WELL STATUS (Producing or Shut-in) <b>Shut In</b>	
DATE OF TEST <b>9/26/77</b>		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.				GAS—MCF.	
FLOW. TUBING PRESS. <b>SI 2557</b>		CASING PRESSURE <b>SF 1542</b>		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.				WATER—BBL.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)										TEST WITNESSED BY <b>John Easley</b>			
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 <b>L. D. Dices</b>		TITLE <b>Drilling Clerk</b>				DATE <b>10/4/77</b>							

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

