

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 _____

b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

2. NAME OF OPERATOR
EL PASO NATURAL GAS COMPANY

3. ADDRESS OF OPERATOR
BOX 289, FARMINGTON, NEW MEXICO 87401

4. LOCATION OF WELL (*Report location clearly and in accordance with any State requirements*)*
At surface 1770'S, 990'E

At top prod. interval reported below

At total depth

14. PERMIT NO.	DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

SF 078416-A ✓

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

S. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Blanco Mesa Verde

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec. 25, T-29-N, R-8-W

NM:PM

12. COUNTY OR PARISH San Juan	13. STATE New Mexico
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5. DATE SPURRED	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
9-18-78	9-25-78	11-11-78	6304' Gr.	

00. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
5608'	5590'			0-5608	

4. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	25. WAS DIRECTIONAL SURVEY MADE
4600-5541' (MV)	NO

6. TYPE ELECTRIC AND OTHER LOGS RUN	27. WAS WELL CORED
IL/GR; CDL/GR; Temp. Survey	NO

CASING RECORD (Report all strings set in well)					
CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8"	32.3#	216'	13 3/4"	224 cf	
7"	20#	2175	8 3/4"	304 cf	

LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
4 1/2"	3133	5608'	431 cf		2 3/8"	5535'	

PERFORATION RECORD (Interval, size and number)	32.	ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
500, 4606, 4613, 4634, 4644, 4651, 4658, 4676, 4704,	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
716, 4722, 4728, 4733, 4853, 4923, 4942, 4949, 4956,	4600-5079	70,000# sand, 135,000 gal wtr
963, 4977, 5079' w/1 SPZ. 5164, 5168, 5172, 5176,		
180, 5184, 5210, 5215, 5219, 5225, 5244, 5250, 5265,	5164-5541'	52,000# ^{sd} , 103,900 gal water
271, 5290, 5329, 5352, 5391, 5409, 5468, 5488, 5541		
/1 SPZ		

PRODUCTION		
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, or on off water and long of water)	WELL STATUS (Producing or shut-in)
	After Frac Gauge - 3999 MCF/D	Shut in

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
1-11-78			→				
DOWN-TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
557	902	→					

DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

LIST OF ATTACHMENTS

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

SIGNED W. P. Shaco TITLE Drilling Clerk DATE Nov. 30, 1978

***(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 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 Federal 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 of electrical and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. 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 the 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 attached logs.

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 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, adequate 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.

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
				M.V. P.L.	4594 5156