

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 Florance			
2. NAME OF OPERATOR Tenneco Oil Company				9. WELL NO. 57R			
3. ADDRESS OF OPERATOR 720 S. Colorado Blvd., Denver, Colorado 80222				10. FIELD AND POOL, OR WILDCAT Blanco Pictured Cliffs			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 790' FNL & 1750' FEL, Unit B At top prod. interval reported below At total depth _____				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 22, T-29-N, R-9-W			
14. PERMIT NO. _____				DATE ISSUED _____		13. STATE New Mexico	
15. DATE SPUDDED 7/1/79		16. DATE T.D. REACHED 7/5/79		17. DATE COMPL. (Ready to prod.) 8/2/79		18. ELEVATIONS (SF, REB, RT, GR, ETC.)* 5809' GL	
20. TOTAL DEPTH, MD & TVD 2479'		21. PLUG, BACK T.D., MD & TVD 2411'		22. IF MULTIPLE COMPL., HOW MANY* →		23. INTERVALS DRILLED BY 10-TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2305-2389 (Pictured Cliffs)						25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN Ind.-GR, CDN, Cased Hole Comp. Neutron						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
8 5/8"	24#	189'	12 1/4"	160 Sacks		None	
4 1/2"	10.5#	2479'	7 7/8"	650 Sacks		None	
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD		
None					SIZE 1 1/4"	DEPTH SET (MD) 2401'	PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number) 92 holes from 2305' to 2389'				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
				2305-2389		300 gal. 15% DI MCA	
						500 gal. 15% MCA	
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—No Connection	
DATE OF TEST 8/9/79	HOURS TESTED 3	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD →	OIL—BBL. AOF=7269	GAS—MCF. Q=3044	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS. 215	CASING PRESSURE 578	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) will be sold pending hook-up						TEST WITNESSED BY	
35. LIST OF ATTACHMENTS two copies of electric logs forwarded by Schlumberger; Dresser Atlas							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.							
SIGNED <u>Carley J. Patton</u>				TITLE <u>Administrative Supervisor</u>			

***(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.) forms, tion 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: "Secks 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; CORREL INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TESTED, CUSHION USED, TIME TOOL, OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Pictured Cliffs	2300	2360	sand, gas

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	1150	
Fruitland	2080	