

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 <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input type="checkbox"/>	WORK OVER <input checked="" type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR						7. UNIT AGREEMENT NAME	
El Paso Natural Gas Company						San Juan 30-6 Unit	
3. ADDRESS OF OPERATOR						8. FARM OR LEASE NAME	
Box 990, Farmington, New Mexico						San Juan 30-6 Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						9. WELL NO.	
At surface 990' N, 990' E						91 (OWO)	
At top prod. interval reported below						10. FIELD AND POOL, OR WILDCAT	
At total depth						Blanco Mesa Verde	
14. PERMIT NO.						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
DATE ISSUED						Sec. 28, T-30-N, R-7-W	
12. COUNTY OR PARISH						13. STATE	
Rio Arriba						New Mexico	

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
W/O 10-29-65	W/O 11-15-65	W/O 11-30-65	6871' OL	
20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	25. WAS DIRECTIONAL SURVEY MADE
Whipstock 6121'			0-6121	Yes
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*				
5608-16, 5640-48 (C.H.) 6056-64, 6080-88 (P.L.)				

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR/CCL, Temperature Survey

CASING RECORD (Report all strings set in well)				CEMENTING RECORD	
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	AMOUNT PULLED	
10 3/4"	40.5#	285'		150 aks.	
5 1/2"	15.5 & 14#	5415'		225 aks.	
2 7/8"	6.4	6121	4 3/4"	100 aks.	

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U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

LINER RECORD				TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
5608-16, 5640-48 w/3 SFF	DEPTH INTERVAL (MD)
6056-64, 6080-88 w/3 SFF	5608-5648
Shot w/2" Gowler	6056-6088
	AMOUNT AND KIND OF MATERIAL USED
	18,110 gal. water, 20,000# sand
	19,840 gal. water, 20,000# sand

33.*		PRODUCTION				WELL STATUS (Producing or shut-in)	
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					Shut-in	
	Flowing						
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS—OIL RATIO
11-30-65	3	3/4"					
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL—GAS RATIO	
	308			4,793 MCF/D			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	TEST WITNESSED BY
	R. F. Hendrix

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 OR G. NAL SIGNED E. S. OBERLY	TITLE Petroleum Engineer	DATE December 21, 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. **Item 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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TOP TRUE VERT. DEPTH
				Pictured Cliffs Cliff House Point Lookout	3765 5515 5966	