

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 _____

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____2. NAME OF OPERATOR
Northwest Pipeline Corporation3. ADDRESS OF OPERATOR
P.O. Box 90, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 1450' FSL & 1630' FEL

At top prod. interval reported below

At total depth Same

14. PERMIT NO. 392 DATE ISSUED
API #30-039-218135. LEASE DESIGNATION AND SERIAL NO.
USA NM 012355

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
San Juan 30-5 Unit8. FARM OR LEASE NAME
San Juan 30-5 Unit9. WELL NO.
64

10. FIELD AND POOL, OR WILDCAT

Blanco Pictured Cliffs

11. SEC. T., R., M., OR BLOCK AND SURVEY
OR AREA
Sec 31 T30N R5W12. COUNTY OR
PARISH
Rio Arriba13. STATE
New Mexico

15. DATE SPUDDED 7-30-78 16. DATE T.D. REACHED 8-5-78 17. DATE COMPL. (Ready to prod.) 12-6-79 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6667'GR 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 3750' 21. PLUG, BACK T.D., MD & TVD 3740' (COTD) 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY → All 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3676' - 3690'; Pictured Cliffs 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN
GR-Neutron27. 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"	24.0	133'	12-1/4"	90 sks	3 bbls
2-7/8"	6.4	3746'	7-7/8"-6-1/4"	170 sks	-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

3676' to 3690' w/ 1 SPF (15 holes)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3676' - 3690'	150 gal 7 1/2% HCl.
	50,000# 10/20 sd in 48,800 gal
	slick wtr.
	Total fluid = 1334 bbls.

33. PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

WO pipeline conn.

Flowing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF/D	WELL STATUS (Producing or shut-in)	WATER—BBL.	GAS-OIL RATIO
12-6-79	3	2"X 0.750"	→	-	CV 897	Shut-in		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	DIST. 0.3 GRAVITY-API (CORR.)		
Tubingless	61 psig	→	-	AOF 901 MCFD	-			

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

Vented

35. LIST OF ATTACHMENTS

ACCEPTED FOR RECORD

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

SIGNED

Barbara C. Cox

TITLE Production Clerk

DATE 12-20-79

DISTRICT
BY

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

Date

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: 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:		38. GEOLOGIC MARKERS				
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		NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.			
Pictured Cliffs			Ss. lt gry, fn-med gr s & p, ws & r, sl calc.	Pictured Cliffs	3622'	same