

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

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 <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-06283																			
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. RESER. <input type="checkbox"/> Other <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																			
2. NAME OF OPERATOR El Paso Natural Gas Company		7. UNIT AGREEMENT NAME San Juan 30-6 Unit																			
3. ADDRESS OF OPERATOR PO Box 4289, Farmington, NM 87499		8. FARM OR LEASE NAME San Juan 30-6 Unit																			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1820'S, 1175'W At top prod. interval reported below At total depth		9. WELL NO. 433																			
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Undes. Fruitland Coal																			
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 11, T-30-N, R-6-W NMPM																			
15. DATE SPUDDED 07-23-88		12. COUNTY OR PARISH Rio Arriba																			
16. DATE T.D. REACHED 08-17-88		13. STATE NM																			
17. DATE COMPL. (Ready to prod.) 08-21-88		19. ELEV. CASINGHEAD 6136' GL																			
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6136' GL		20. TOTAL DEPTH, MD & TVD 2921'																			
21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY* 1																			
23. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2810-2919' (Fruitland)		25. WAS DIRECTIONAL SURVEY MADE no																			
26. TYPE ELECTRIC AND OTHER LOGS RUN --		27. WAS WELL CORRED no																			
28. CASING RECORD (Report all strings set in well)																					
<table border="1"><thead><tr><th>CASING SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>CEMENTING RECORD</th><th>AMOUNT PULLED</th></tr></thead><tbody><tr><td>9 5/8"</td><td>36.0#</td><td>273'</td><td>12 1/4"</td><td>338 cu.ft.</td><td></td></tr><tr><td>7"</td><td>20.0#</td><td>2810'</td><td>8 3/4"</td><td>848 cu.ft.</td><td></td></tr></tbody></table>				CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	9 5/8"	36.0#	273'	12 1/4"	338 cu.ft.		7"	20.0#	2810'	8 3/4"	848 cu.ft.	
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29. LINER RECORD																					
<table border="1"><thead><tr><th>SIZE</th><th>TOP (MD)</th><th>BOTTOM (MD)</th><th>SACKS CEMENT*</th><th>SCREEN (MD)</th></tr></thead><tbody><tr><td>5 1/2"</td><td>2743'</td><td>2921'</td><td>did not cmt.</td><td></td></tr></tbody></table>				SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	5 1/2"	2743'	2921'	did not cmt.									
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30. TUBING RECORD																					
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2 7/8"	2871'																				
31. PERFORATION RECORD (Interval, size and number)																					
2810-2919' (predrilled liner)																					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																					
<table border="1"><thead><tr><th>DEPTH INTERVAL (MD)</th><th>AMOUNT AND KIND OF MATERIAL USED</th></tr></thead><tbody><tr><td></td><td></td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr></tbody></table>				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED																
DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED																				
33.* PRODUCTION																					
DATE FIRST PRODUCTION																					
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing-capable of comm HC; to be sold when connected																					
WELL STATUS (Producing or shut-in)																					
DATE OF TEST																					
HOURS TESTED																					
CHOKE SIZE																					
PROD'N. FOR TEST PERIOD																					
OIL—BSL.																					
GAS—MCF.																					
WATER—BSL.																					
GAS-OIL RATIO																					
FLOW. TUBING PRESS.																					
CASING PRESSURE																					
CALCULATED 24-HOUR RATE																					
OIL—BSL.																					
GAS—MCF.																					
WATER—BSL.																					
OIL GRAVITY-API (CORR.)																					
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) to be sold																					
35. LIST OF ATTACHMENTS temp. survey																					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																					
Regulatory Affairs																					
9-28-88																					
SIGNED																					
TITLE																					
DATE																					

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

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, flowing and shut-in pressures, and recoveries):				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	2103'	2295'	ss. White cr-grn s.	Ojo Alamo Kirtland Fruitland	2103' 2295' 2685'	
Kirtland	2295'	2685'	Gry sh interbedded w/tight gry fine-grn ss.			
Fruitland	2685'	2921'	Gry carb sh, scattered coals, coals and gry, tight, fine-grn ss.			

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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	GAS
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PROMOTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator El Paso Natural Gas Company *Meridian*

Address PO Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership			

Other (Please explain) _____

SEP 3 0 1988
OIL CON. DIV.
DIST.

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>San Juan 30-6 Unit</u>	Well No. <u>433</u>	Pool Name, including Formation <u>Undes. Fruitland Coal</u>	Kind of Lease State, (Federal or fee)	Lease No. <u>NM-06283</u>
Location				
Unit Letter <u>L</u>	<u>1820</u> Feet From The <u>South</u> Line and <u>1175</u> Feet From The <u>West</u>			
Line of Section <u>11</u>	Township <u>30N</u>	Range <u>6W</u>	NMPM, <u>Rio Arriba</u>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Meridian Oil Inc.</u>	<u>PO Box 4289, Farmington, NM 87499</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Northwest Pipeline</u>	<u>3530 E. 30th, Farmington, NM 87401</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? when
Unit <u>L</u> Sec. <u>11</u> Twp. <u>30N</u> Rge. <u>6W</u>	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

[Signature]
Regulatory Affairs

September 28, 1988

(Title)

(Date)

OIL CONSERVATION DIVISION

OCT 03 1988

APPROVED _____, 19 _____

BY *[Signature]*

TITLE SUPERVISION DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X	X					
Date Spudded 07-23-88	Date Compl. Ready to Prod. 08-21-88	Total Depth 2921'				P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 6136' GL	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 2810'				Tubing Depth 2871'			
Perforations 2810-2919' (predrilled liner)						Depth Casing Shoe 2921'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SAC. CEMENT				
12 1/4"	9 5/8"		273'		538 cu. ft.				
8 3/4"	7"		2810'		849 cu. ft.				
6 1/4"	5 1/2"		2921'		did not cmt				
	2 7/8"		2871'						

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) backpressure	Tubing Pressure (shut-in) 1488	Casing Pressure (shut-in) 1481	Choke Size

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. LEASE DESIGNATION AND SERIAL NO.

NM-06283

2. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

San Juan 30-6 Unit

8. FARM OR LEASE NAME

San Juan 30-6 Unit

9. WELL NO.

433

10. FIELD AND POOL, OR WILDCAT

Basin Fruitland Coal

11. SEC. T. R. M. OR S.E. AND

Sec.11, T30N,R6W
NMMPM

12. COUNTY OR PARISH

Rio Arriba

13. STATE

NM

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

El Paso Natural Gas Company Meridian Oil

3. ADDRESS OF OPERATOR

P.O. Box 4289, Farmington, NM 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1820'S, 1175'W

14. PERMIT NO.

15. ELEVATIONS (Show whether of, ft. or m.)

6136'GL

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Revision

PLUG OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. OPERATIONS PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Attached is a copy of the C102 showing the revised pool & dedication.

RECEIVED

DEC 28 1988

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE Regulatory Affairs

DATE 12-22-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

JAN 04 1989

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

Title to U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make, in any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOCC

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-102
Revised 10-1-78

All distances must be from the outer boundaries of the Section.

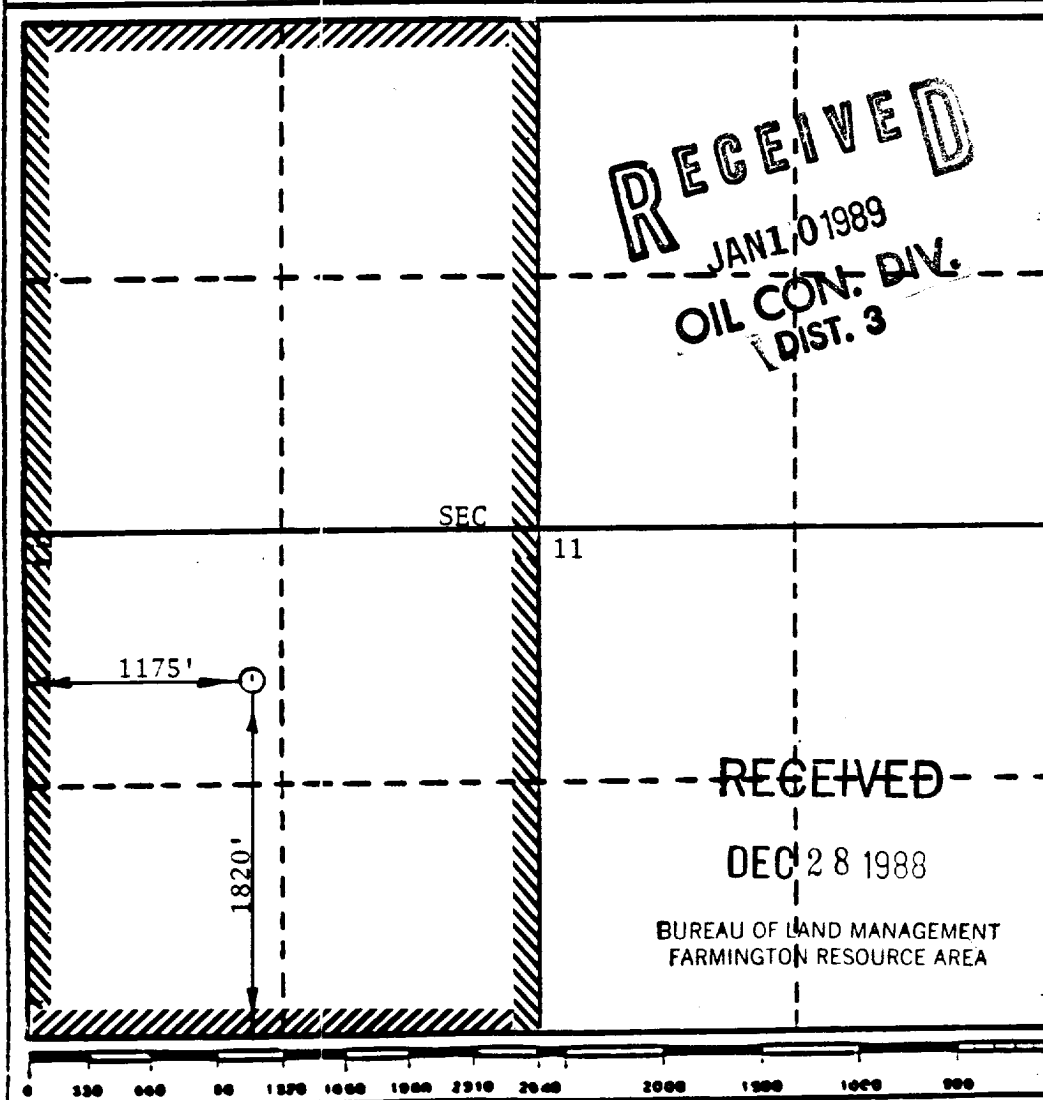
Operator <i>Meridian Oil</i> EL PASO NATURAL GAS CO.		Lease SAN JUAN 30-6 UNIT (NM-06283)		Well No. 433
Unit Letter L	Section 11	Township 30-N	Range 6-W	County RIO ARriba
Actual Footage Location of Wells				
1820 feet from the SOUTH line and		1175 feet from the WEST line		
Ground Level Elev. 6136	Producing Formation Fruitland Coal	Pool Basin	Dedicated Acreage 320 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation unitization

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name J. Bradford
Drilling Clerk
Position Meridian Oil
El Paso Natural Gas
Company
Date 12-22-88

ISAAC L. WEAVER
NEW MEXICO
1936
PROFESSIONAL ENGINEER
I hereby certify that the well location shown on this plat was plotted from field notes of actual survey made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

MARCH 15, 1988

Date Surveyed
ISAAC L. WEAVER
Registered Professional Engineer
and/or Land Surveyor

Certificate No. 8966