

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 ☐		7. UNIT AGREEMENT NAME	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESRV. ☐ Other ☐		8. FARM OR LEASE NAME Helen Jackson	
2. NAME OF OPERATOR Tenneco Oil Company		9. WELL NO. 15	
3. ADDRESS OF OPERATOR P. O. Box 1714, Durango, Colorado 81301		10. FIELD AND POOL, OR WILDCAT Pictured Cliffs	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 790 FNL 1105 FEL At top prod. interval reported below At total depth		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 34, T-29-N, R-9-W	
14. PERMIT NO. U. S. GEOLOGICAL SURVEY F. D. WILSON, N. M.		12. COUNTY OR PARISH San Juan	
		13. STATE New Mexico	
15. DATE SPUDDED 4/27/66	16. DATE T.D. REACHED 4/30/66	17. DATE COMPL. (Ready to prod.) 5/24/66	18. ELEVATIONS (OF, RKB, RT, GR, ETC.)* 5701 GR
20. TOTAL DEPTH, MD & TVD 2260	21. PLUG, BACK T.D., MD & TVD 2192	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY 0-2160
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2127-2167 Pictured Cliffs			25. WAS DIRECTIONAL SURVEY MADE Yes
26. TYPE ELECTRIC AND OTHER LOGS RUN GR Density			27. WAS WELL CORED No
28. CASING RECORD (Report all strings set in well)			
CASING SIZE 8-5/8 3-1/2	WEIGHT, LB./FT. 20 & 24# 9.2#	DEPTH SET (MD) 129 2254	HOLE SIZE 12-1/4 7-7/8
		CEMENTING RECORD 100 sx 275 sx	AMOUNT PULLED None
29. LINER RECORD			
SIZE NONE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
		SCREEN (MD)	
30. TUBING RECORD			
SIZE NONE	DEPTH SET (MD)	PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number) 2127-2135 1 HPF 2154-60 2 HPF 2163-67 1 HPF			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 2127-2167 AMOUNT AND KIND OF MATERIAL USED 30,000 lbs acid & 30,000 gals wtr.			
33. PRODUCTION			
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in)
DATE OF TEST 5/24/66	HOURS TESTED 3	CHOKE SIZE 3/4	PROD'N. FOR TEST PERIOD →
FLOW. TUBING PRESS. 89	CASING PRESSURE ---	CALCULATED 24-HOUR RATE →	OIL—BBL. 1229
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
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 Harold C. Nichols TITLE Senior Production Clerk DATE June 7, 1966			

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

5 USGS, Frmn., 1 Cont., 1 File

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: 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	TRUE VERT. DEPTH
Pictured cliffs	2127	2167	Sand, Gas			