

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 _____		5. LEASE DESIGNATION AND SERIAL NO. SF 078194	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR El Paso Natural Gas Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico		8. FARM OR LEASE NAME Ludwick	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 850'N, 1850'W At top prod. interval reported below At total depth		9. WELL NO. 24	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUNDED 7-10-66		16. DATE T.D. REACHED 7-19-66	
17. DATE COMPL. (Ready to prod.) 8-10-66		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5975' GL	
19. ELEV. CASINGHEAD		10. FIELD AND POOL, OR WILDCAT Aztec Pictured Cliffs	
20. TOTAL DEPTH, MD & TVD 2467'		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 6, T-29-N, R-10-W N.M.P.M.	
21. PLUG, BACK T.D., MD & TVD		12. COUNTY OR PARISH San Juan	
22. IF MULTIPLE COMPL., HOW MANY*		13. STATE New Mexico	
23. INTERVALS DRILLED BY 0 - 2467'		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2351-2409 (Pictured Cliffs)	
25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN I-ES, G/CCL, Temp. Survey	
27. WAS WELL CORRED Yes		28. CASING RECORD (Report all strings set in well)	
Casing Size		Weight, lb./ft.	
8 5/8"		24#	
2 7/8"		6.4#	
Depth Set (MD)		Hole Size	
139'		12 1/4"	
2467'		6 1/4"	
Cementing Record		Amount Pulled	
85 Sks.			
235 Sks.			
29. LINER RECORD		30. TUBING RECORD	
Size		Top (MD)	
Bottom (MD)		Sacks Cement*	
Screen (MD)		Size	
Depth Set (MD)		Packer Set (MD)	
Tubingless Completion			
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2351-56 w/4 SPP: 2364-74. 2399-2409 w/2 SPP		Depth Interval (MD)	
2351-2409		Amount and Kind of Material Used	
		24,500 gal. water, 27,100# sand	
33.* PRODUCTION		DATE FIRST PRODUCTION	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in)	
Flowing		Shut In	
DATE OF TEST		HOURS TESTED	
8-10-66		3	
CHOKE SIZE		PROD'N. FOR TEST PERIOD	
3/4"			
OIL—BBL.		GAS—MCF.	
WATER—BBL.		GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE	
SI 572		CALCULATED 24-HOUR RATE	
OIL—BBL.		GAS—MCF.	
WATER—BBL.		OIL GRAM PER GALLON	
584			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY Don Norton	
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 Original Signed F. H. WOOD		TITLE Petroleum Engineer	
DATE 9-2-66			

*(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. **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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
Pictured Cliffs	212		