

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R365.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM 0702	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
2. NAME OF OPERATOR Supron Energy Corporation		7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR P.O. Box 808, Farmington, New Mexico 87401		8. FARM OR LEASE NAME Wilson	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements). At surface 1635 ft./N ; 1550 ft./E line At top prod. interval reported below Same as above At total depth Same as above		9. WELL NO. 2	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT Undeveloped Fruitland Ext.	
15. DATE SPUDDED 2/27/80		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 31, T29N, R10W N.M.P.M.	
16. DATE T.D. REACHED 3/3/80		12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 5/15/80		13. STATE New Mexico	
18. ELEVATIONS (DF, REB, BT, GR, ETC.)* 5593 R.K.B.		19. ELEV. CASINGHEAD 5582	
20. TOTAL DEPTH, MD & TVD 3052 MD & TVD		21. PLUG, BACK T.D., MD & TVD 3011 MD & TVD	
22. IF MULTIPLE COMPL., HOW MANY* 2		23. INTERVALS DRILLED BY ROTARY TOOLS 0 - 3052 CABLE TOOLS _____	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1531 - 1613 Fruitland MD & TVD		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electric & Gamma - Ray Density		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
7-5/8"	26.40	203	9-7/8"
4-1/2"	9.50	3052	6-3/4"
			CEMENTING RECORD
			85 sacks
			350 sacks
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
			SCREEN (MD)
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
No	tubing	2723	
31. PERFORATION RECORD (Interval, size and number)			
1 - 0.42" hole at each of the following depths: 1531, 1533, 1535, 1559, 1562, 1565, 1567, 1575, 1579, 1583, 1595, 1598, 1604, 1607, 1613, Total of 15 holes.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
1531 - 1613		1000 gal. 15% HCl, 45,000 lb. 20-40 sand, and foam	
33.* PRODUCTION RECORD			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
5/15/80		WELL STATUS (Producing or shut-in) Shut-in	
HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	WATER—BBL.
3	3/4"	→	GAS—OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	WATER—BBL.
---	5	→	OIL GRAVITY-API (CORR.)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented		TEST WITNESSED BY Clifton Gates	
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 <u>Kenneth E. Roddy</u>		TITLE <u>Production Superintendent</u>	
DATE <u>May 15, 1980</u>			

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

NMOCC

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 both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number 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 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 of electric logs, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the 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 additional interval, or intervals, top(s), bottom(s), and name(s) (if any) for only the interval reported in item 22, and in item 24 should 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 interval 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	TO MEAS. DEPTH
						Ojo Alamo (Base)	745
						Fruitland	1525

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. NM 0702	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Supron Energy Corporation		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 808, Farmington, New Mexico 87401		5. FARM OR LEASE NAME Wilson	
4. LOCATION OF WELL (Report location clearly and in accordance with State requirements) At surface 1635 ft./N ; 1550 ft./E line At top prod. interval reported below Same as above At total depth Same as above		9. WELL NO. 2	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL OR WILDCAT Blomfield Aztec Chacra est	
11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 31, T29N, R10W, N.M.P.M.		12. COUNTY OR PARISH San Juan	
13. STATE New Mexico		19. ELEV. CASINGHEAD 5582	
15. DATE SPUDDED 2/27/80	16. DATE T.D. REACHED 3/3/80	17. DATE COMPL. (Ready to prod.) 5/15/80	18. ELEVATIONS (DF, RKB, RT, GR, ETC.) * 5593 R.K.B.
20. TOTAL DEPTH, MD & TVD 3052 MD & TVD	21. PLUG, BACK T.D., MD & TVD 3011 MD & TVD	22. IF MULTIPLE COMPL., HOW MANY * 2	23. INTERVALS DRILLED BY ROTARY TOOLS 0 - 3052
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) * 2770 - 2892 Chacra MD & TVD			25. WAS DIRECTIONAL SURVEY MADE No
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electric and Gamma - Ray Density			27. WAS WELL CORED No
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
7-5/8"	26.40	203	9-7/8"
4-1/2"	9.50	3052	6-3/4"
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT *
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-1/16" IU	2728	2723	
31. PERFORATION RECORD (Interval, size and number) 1 - 0.42" hole at each of the following depths: 2770, 2772, 2774, 2776, 2778, 2780, 2867, 2869, 2871, 2873, 2875, 2877, 2890, 2891, 2892, total of 15 holes.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 2770 - 2892 AMOUNT AND KIND OF MATERIAL USED 1000 gal. 15% HCl, 80,000 lb. 20-40 sand, and foam.			
33. PRODUCTION RECORD			
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping, size and type of pump) Flowing		WELL STATUS (Producing or shut-in) Shut-in
DATE OF TEST 5/8/80	HOURS TESTED 3	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD OIL—BBL. _____ GAS—MCF. 343
FLOW. TUBING PRESS. 210	CASING PRESSURE _____	CALCULATED 24-HOUR RATE _____	WATER—BBL. _____ OIL GRAVITY-API (CORR.) 2741
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented			TEST WITNESSED BY Clifton Gates
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 Kenneth E. Roddy		TITLE Production Superintendent	
		DATE May 15, 1980	

*(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 both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number 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 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 and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult 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 attached 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 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, adequate 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.

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
				Ojo Alamo (Base)	745
				Fruitland	1525
				Pictured Cliffs	1782
				Chacra	2366