

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 SUPRON ENERGY CORPORATION							
3. ADDRESS OF OPERATOR P.O. Box 808, Farmington, New Mexico 87401							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 940 ft./N ; 1650 ft./W line At top prod. interval reported below Same as above At total depth Same as above							
14. PERMIT NO. U.S. GEOLOGICAL SURVEY DATE ISSUED							
5. LEASE DESIGNATION AND SERIAL NO. SF 080724 A							
6. IF INDIAN, ALLOTTEE OR TRIBE NAME							
7. UNIT AGREEMENT NAME							
8. FARM OR LEASE NAME Zachry							
9. WELL NO. 15-E							
10. FIELD AND POOL, OR WILDCAT Wildcat Gallup							
11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 33, T-29N, R-10W, NMPM							
12. COUNTY OR PARISH San Juan							
13. STATE New Mexico							
15. DATE SPUDDED 1-28-81		16. DATE T.D. REACHED 2-9-81		17. DATE COMPL. (Ready to prod.) 5-29-81		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5633 R.K.B.	
19. ELEV. CASINGHEAD 5621		20. TOTAL DEPTH, MD & TVD 6545 MD & TVD		21. PLUG, BACK T.D., MD & TVD 6499 MD & TVD		22. IF MULTIPLE COMPL., HOW MANY* 2	
23. INTERVALS DRILLED BY 0 - 6545		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5407 - 5712 Gallup (MD & TVD)		25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electric and Compensated 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	
8-5/8"		24.00		290		12-1/4"	
5-1/2"		15.50		6545		7-7/8"	
29. LINER RECORD		30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number)			
Size		Top (MD)		Bottom (MD)		Sacks Cement*	
2-1/16" IJ		5770		6269		1 - 0.42" hole @ each of the following depths: 5407, 09, 11, 38, 40, 42, 58, 60, 62, 76, 78, 80, 5498, 5500, 02, 34, 36, 38, 68, 70, 72, 5612, 14, 16, 5626, 28, 30, 50, 52, 54, 72, 74, 76, 88, 90, 92, 5708, 10, 12 Total of 39 holes).	
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		Depth Interval (MD)		Amount and Kind of Material Used			
5407 - 5712				3000 gal. 7 1/2% HCL, 220,000 lb. 20-40 sd, & 120,000 gal. 40 lb. cross-linked gel. All fluid contained 2% KCL, biocide, and clay inhibitor.			
33. PRODUCTION		Date First Production		Production Method (Flowing, gas lift, pumping—size and type of pump)		Well Status (Producing or shut-in)	
Pumping						Shut-in	
Date of Test		Hours Tested		Choke Size		Prod'n. for Test Period	
5-9-81		24		5/8"		16	
Flow. Tubing Press.		Casing Pressure		Calculated 24-hour Rate		Oil—BBL.	
30		50				16	
34. Disposition of Gas (Sold, used for fuel, vented, etc.)		Test Witnessed By		Bennie Brown			
Vented							
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
Kenneth E. Roddy

TITLE

Production Superintendent

DATE

JUN 9 1981
June 1, 1981

FARMINGTON DISTRICT

BY

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

NMCCG

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	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			Ojo Alamo (Base)	832	
			Fruitland	1600	
			Pictured Cliffs	1870	
			Chacra	2850	
			Cliff House	3450	
			Point Lookout	4145	
			Gallup	5395	
			Base Greenhorn	6240	
			Dakota	6290	