

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. RESVR. ☐ Other _____		8. FARM OR LEASE NAME Schwerdtfeger	
2. NAME OF OPERATOR El Paso Natural Gas Company		9. WELL NO. 1-X	
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 940'S, 1650'W At top prod. interval reported below At total depth		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 27, T-31-N, R-9-W N.M.P.M.	
14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH San Juan	
15. DATE SPUDDED 10-9-66		13. STATE New Mexico	
16. DATE T.D. REACHED 10-19-66		18. ELEVATIONS (DF, RKB, RT, GB, ETC.)* 6070' GL	
17. DATE COMPL. (Ready to prod.) 11-1-66		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 5507'		21. PLUG, BACK T.D., MD & TVD C.O. 5474'	
22. IF MULTIPLE COMPL., HOW MANY* →		23. INTERVALS DRILLED BY 0 - 5507	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4667-5458' (Mesa Verde)		25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN I-GR, FDC, Temp. Survey		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
9 5/8"	32.3#	204'	13 3/4"
7"	20#	3217'	8 3/4"
		CEMENTING RECORD	
		130 Sks.	
		175 Sks.	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
4 1/2"	3132	5507	235
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 3/8"	5432'		
31. PERFORATION RECORD (Interval, size and number)			
4667-71, 4688-92, 4710-14, 4731-47, 4758-66, 4776-80 w/16 PBZ. 5150-56, 5201-12, 5234-46, 5266-72, 5282-88 w/24 SPZ. 5317-5458 w/4 SPT			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4667-4760		30,210 gal. water, 27,500# sand	
5150-5288		18,160 gal. water, 20,000# sand	
5317-5458		18,800 gal. water, 13,000# sand	
33. PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
		Flowing	
DATE OF TEST		HOURS TESTED	
11-1-66		3.3	
FLOW. TUBING PRESS.		CHOKE SIZE	
SI 516		3/4"	
CASING PRESSURE		PROD'N. FOR TEST PERIOD	
SI 733		→	
CALCULATED 24-HOUR RATE		OIL—BBL.	
→		8345	
DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		GAS—MCF.	
		8345	
WATER—BBL.		GAS-OIL RATIO	
OIL GRAVITY-API (CORR.)			
TEST WITNESSED BY			
A. J. Loleit			
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 11-10-66			

***(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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP TRUE VERT. DEPTH
				Ojo Alamo	1583	
				Kirtland	1692	
				Fruitland	2536	
				Pictured Cliffs	2907	
				Lewis	3090	
				Cliff House	4658	
				Manefee	4787	
				Point Lookout	5118	
				Mancos	5461	