

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. RESV. ☐	Other _____
2. NAME OF OPERATOR El Paso Natural Gas Company									
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1450' S, 1650' W At top prod. interval reported below At total depth									
14. PERMIT NO.					DATE ISSUED				
15. DATE SPUDDED 11-19-66									
16. DATE T.D. REACHED 12-1-66									
17. DATE COMPL. (Ready to prod.) 12-12-66									
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5969' OL									
19. ELEV. CASINGHEAD									
20. TOTAL DEPTH, MD & TVD 4949				21. PLUG, BACK T.D., MD & TVD 4935				22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY				ROTARY TOOLS				CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4712-4925 (NW)				25. WAS DIRECTIONAL SURVEY MADE Yes				26. TYPE ELECTRIC AND OTHER LOGS RUN I-GR, FDC-GR, Temperature Survey	
27. WAS WELL CORED Yes									
28. CASING RECORD (Report all strings set in well)									
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD	
9 5/8"		32.30#		204'		13 3/4"		130 sks.	
7"		20#		2550		8 3/4"		240 sks.	
29. LINER RECORD									
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)	
4 1/2"		2440		4949		250			
30. TUBING RECORD									
SIZE		DEPTH SET (MD)		SACKS CEMENT (MD)					
2 3/8"		4889							
31. PERFORATION RECORD (Interval, size and number) 4712-32, 4742-47, 4764-69, 4806-11, 4883-88, 4920-25 w/20 SPZ									
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.									
DEPTH INTERVAL (MD)					AMOUNT AND KIND OF MATERIAL USED				
4712-4925					69,310 gal wtr., 70,000# sand 500 gal acid				
33.* PRODUCTION									
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		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.	
12-12-66		3		3/4"		→			
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.	
SI 916		SI 939		→		9884 MCF/D			
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 Original Signed F. H. WOOD TITLE Petroleum Engineer DATE Dec. 29, 1966

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

RECEIVED
JAN 3 1967
OIL CON. COM.
DIST. 3

RECEIVED
DEC 30 1966
R. P. Hendrick

*(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, shall be 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
				Ojo Alamo	535	
				Kirtland	608	
				Fruitland	1903	
				Pictured Cliff	2254	
				Lewis	2456	
				Cliff House	3996	
				Mensefee	4160	
				Point Lookout	4702	