

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.6.

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
Southland Royalty Company

3. ADDRESS OF OPERATOR
P. O. Drawer 570, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 1100' FNL & 940' FWL
At top prod. interval reported below
At total depth

5. LEASE DESIGNATION AND SERIAL NO.
NM-24667

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
State Line

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Basin Dakota

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
Section 13, T32N, R13W

12. COUNTY OR PARISH
San Juan

13. STATE
New Mexico

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUNDED 10-23-79 16. DATE T.D. REACHED 11-01-79 17. DATE COMPL. (Ready to prod.) 12-11-79 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6180' GR 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 4885' 21. PLUG BACK T.D., MD & TVD 4883' 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS 0-4885 CABLE TOOLS

24. PRODUCING INTERVAL(S) OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
4617' - 4808'

25. WAS DIRECTIONAL SURVEY MADE
Deviation

26. TYPE ELECTRIC AND OTHER LOGS RUN
IES, GR-Density, SNP, GR-Induction and GR-Correlation Logs

27. WAS WELL CORED
No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8"	32.30#	497'	12-1/4"	280 sacks	
7"	20#	3106'	8-3/4"	260 sacks	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
4-1/2"	2939'	4885'	260	

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8"	4795'	---

31. PERFORATION RECORD (Interval, size and number)
4617', 4622', 4627', 4632', 4707', 4712', 4718', 4730', 4752', 4797', 4802', 4808'.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4617' - 4808'	88,700 gallons of water and 73,700# of 20/40 sand.

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.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
12-18-79	3	3/4"	→				

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	PERFORATION—API (CORR.)
123	304	→		1672		

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
Sold

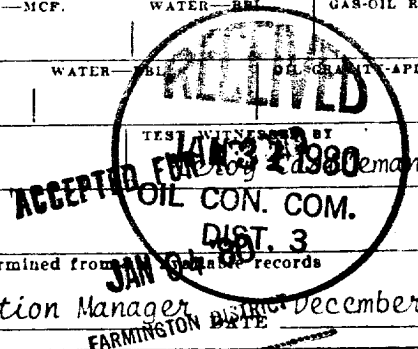
35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from _____ records

SIGNED [Signature] TITLE District Production Manager DATE December 19, 1979

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

NMOCG



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General: This form is designed for submitting a summary and corrected 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: "Sucks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

37. SUMMARY OF POROSITY ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF, CORRELATE INTERVALS, AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION PRESS. TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERY.

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Pictured Cliffs	32'		
Cliffs House	1545'		
Point Lookout	2392'		
Gallup	3792'		
Graneros	4610'		
Dakota	4702'		

38.

GEOLOGIC MARKERS

NAME

MEAS. DEPTH

