

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 LOGS

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		7. UNIT AGREEMENT NAME Hubbard																			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		8. FARM OR LEASE NAME Hubbard																			
2. NAME OF OPERATOR Southland Royalty Company		9. WELL NO. 7115																			
3. ADDRESS OF OPERATOR P.O. Drawer 570, Farmington, New Mexico 87499-0570		10. FIELD AND POOL, OR WILDCAT Blanco Pictured Cliffs Undesignated Emland																			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 790' FSL & 1760' FWL At top prod. interval reported below At total depth		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Section 15, T32N, R12W																			
14. PERMIT NO. DATE ISSUED		12. COUNTY OR PARISH San Juan																			
15. DATE SPUNDED 2-25-81		13. STATE New Mexico																			
16. DATE T.D. REACHED 2-27-81		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6090																			
17. DATE COMPL. (Ready to prod.) 8-22-81		19. ELEV. CASINGHEAD																			
20. TOTAL DEPTH, MD & TVD 2685'		21. PLUG, BACK T.D., MD & TVD 2624'																			
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-2685																			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2486'-2510' (Pictured Cliffs)		25. WAS DIRECTIONAL SURVEY MADE Deviation																			
26. TYPE ELECTRIC AND OTHER LOGS RUN GR-Density, GR-Induction and GR-CBL/CCL		27. WAS WELL CORED No																			
28. CASING RECORD (Report all strings set in well)																					
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31. PERFORATION RECORD (Interval, size and number) Pictured Cliffs: 2486', 2492', 2498', 2504', 2510'																					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																					
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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 by me and the records of the well.																					
SIGNED <u>Jim Choquette</u> TITLE <u>Dist. Prod. Manager</u> DATE <u>Sept. 15, 1981</u>																					

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

AMOC

FARMINGTON District
BY Jim

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	TRUE VERT. DEPTH
Ojo Alamo Farmington Fruitland Pictured Cliffs	Not Present 1210' 1995' 2422'					