

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved,
Budget Bureau No. 42-R355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. SF 078922																			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____																			
2. NAME OF OPERATOR El Paso Natural Gas Company		7. UNIT AGREEMENT NAME Canyon Largo Unit																			
3. ADDRESS OF OPERATOR PO Box 990, Farmington, NM 87401		8. FARM OR LEASE NAME Canyon Largo Unit																			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1100'S, 1500'E At top prod. interval reported below At total depth		9. WELL NO. 222																			
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT Ballard Pictured Cliffs																			
15. DATE SPUNDED 8-23-73 16. DATE T.D. REACHED 9-2-73 17. DATE COMPL. (Ready to prod.) 10-12-73 18. ELEVATIONS (DF, RBB, RT, GR, ETC.)* 6961'GL 19. ELEV. CASINGHEAD _____		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 3, T-24-N, R-7-W NMPM																			
20. TOTAL DEPTH, MD & TVD 2576' 21. PLUG, BACK T.D., MD & TVD 2565' 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS 0-2576' CABLE TOOLS _____		12. COUNTY OR PARISH Rio Arriba NM																			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2466-2498'(Pictured Cliffs)		13. STATE NM																			
25. TYPE ELECTRIC AND OTHER LOGS RUN FDC-GR; IES; Temp. Survey		26. WAS DIRECTIONAL SURVEY MADE no																			
27. WAS WELL CORED no		28. CASING RECORD (Report all strings set in well)																			
<table border="1" style="width:100%"><thead><tr><th>CASING SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>CEMENTING RECORD</th><th>AMOUNT PULPED</th></tr></thead><tbody><tr><td>8 5/8"</td><td>24.0#</td><td>137'</td><td>12 1/4"</td><td>107 cu. ft.</td><td></td></tr><tr><td>2 7/8"</td><td>6.4#</td><td>2576'</td><td>7 7/8" & 6 3/4"</td><td>249 cu. ft.</td><td></td></tr></tbody></table>				CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULPED	8 5/8"	24.0#	137'	12 1/4"	107 cu. ft.		2 7/8"	6.4#	2576'	7 7/8" & 6 3/4"	249 cu. ft.	
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31. PERFORATION RECORD (Interval, size and number) 2466-78' and 2490-98' with 16 shots per zone																					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. <table border="1" style="width:100%"><thead><tr><th>DEPTH INTERVAL (MD)</th><th>AMOUNT AND KIND OF MATERIAL USED</th></tr></thead><tbody><tr><td>2466-2498'</td><td>29,000#sand; 30,800 gal. water</td></tr></tbody></table>				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	2466-2498'	29,000#sand; 30,800 gal. water														
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33. PRODUCTION DATE FIRST PRODUCTION _____ PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) _____ WELL STATUS (Producing or shut-in) _____ DATE OF TEST 10-12-73 HOURS TESTED 3 CHOKER SIZE 3/4" PROD'N. FOR TEST PERIOD _____ OIL—BBL. _____ GAS—MCF. _____ OIL—BBL. _____ GAS—MCF. _____ OIL GRAVITY-API (CORR.) _____ FLOW, TUBING PRESS. casing pressure SI 309 CALCULATED 24-HOUR RATE _____ OIL—BBL. _____ GAS—MCF. 1224 AOF _____ OIL GRAVITY-API (CORR.) _____ 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) _____ TEST WITNESSED BY _____ 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 <u>[Signature]</u> TITLE Drilling Clerk DATE October 23, 1973																					

* (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
				Pictured Cliffs	2465'		