

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions 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. RESVR. ☐	Other
2. NAME OF OPERATOR						Jicarilla Contract 148	
3. ADDRESS OF OPERATOR						Jicarilla Apache	
501 Airport Drive, Farmington, NM 87401						7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						8. FARM OR LEASE NAME	
At surface 940' FSL x 1020' FWL						Jicarilla Contract 148	
At top prod. interval reported below Same						9. WELL NO.	
At total depth Same						22	
14. PERMIT NO.						10. FIELD AND POOL, OR WILDCAT	
DATE ISSUED						South Blanco Pictured Cliffs	
12. COUNTY OR PARISH						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
Rio Arriba						SW/4, SW/4, Section 13, T25N, R5W	
13. STATE						19. ELEV. CASINGHEAD	
New Mexico						15. DATE SPELDED	
11-20-80						16. DATE T.D. REACHED	
12-4-80						17. DATE COMPL. (Ready to prod.)	
4-17-81						18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	
6918' GL						23. INTERVALS DRILLED BY	
20. TOTAL DEPTH, MD & TVD						ROTARY TOOLS	
5651'						CABLE TOOLS	
21. PLUG BACK T.D., MD & TVD						24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	
5135'						25. WAS DIRECTIONAL SURVEY MADE	
22. IF MULTIPLE COMPL., HOW MANY*						No	
2						27. WAS WELL CORED	
3170'-3202' - South Blanco Pictured Cliffs						No	
26. TYPE ELECTRIC AND OTHER LOGS RUN						GR; SP; CNL; FDC; BHC; DIL; Caliper	
29. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 5/8"		24#		306'		12 1/4"	
5 1/2"		17#		5651'		7 7/8"	
30. TUBING RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		PACKER SET (MD)	
1 1/4"						3231'	
31. PERFORATION RECORD (Interval, size and number)							
3170-3203, with 2 spf, a total of 64, .38" holes.							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
3170-3202				63,000 gallons of foam and 95,000 pounds of 10-20 sand.			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
		Flowing				Shut-In	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
6-19-81		3 Hrs.					
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
26 PSIG		187 PSIG				57	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		OIL—BBL.		GAS—MCF.		WATER—BBL.	
To be sold.				453			
35. LIST OF ATTACHMENTS		TEST WITNESSED BY					

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

SIGNED

TITLE Dist. Admin. Supvr.

DATE JUL 30 1981

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

NMOCC

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 15: 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 Comment": 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.)

33. SUMMARY OF PERIODS ZONES:		38. GEOLOGIC MARKERS	
FORMATION	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH
TOP	BOTTOM		TRUE VERT. DEPTH
Ojo Alamo	2630		
Kirtland	2845		
Fruitland	2985		
Pictured Cliff	3170		
Chacra	3202		
Cliffhouse	4055		
Menefee	4855		
Point Lookout	4860		
	5370		
	5554		