

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:		GIL WELL ☐	GAS WELL ☒	ERT ☐	Other ☐			
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESEAL ☐	Other ☐	
2. NAME OF OPERATOR El Paso Exploration Company								
3. ADDRESS OF OPERATOR P.O. Box 289, Farmington, NM 87401								
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.) At surface 1800'S, 1580'E At top prod. interval reported below At total depth								
14. PERMIT NO.				DATE ISSUED		12. COUNTY OR PARISH Rio Arriba		13. STATE New Mexico
15. DATE SPUDDED 8-21-81		16. DATE T.D. REACHED 9-5-81		17. DATE COMPL. (Ready to prod.) 11-12-81		18. ELEVATIONS (DF, RKB, ET, GR, ETC.) 7741' GL		19. ELEV. CASINGHEAD
20. TOTAL DEPTH, MD & TVD 7741'		21. PLUG, BACK T.D., MD & TVD 7725'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-7741		ROTARY TOOLS CABLE TOOLS
24. PRODUCING INTERVAL(S). OF THIS COMPLETION—TCP, BOTTOM NAME (MD AND TVD)* 7426-7618' (Dak)								25. WAS DIRECTIONAL SURVEY MADE No
26. TYPE ELECTRIC AND OTHER LOGS RUN FDC; I-SFL; Temp. Survey								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"	40#	232'	12 1/4"	236	
4 1/2"	10.5#	7741'	6 1/4"	1496 cf.	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	7612'	

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
7426, 7439, 7454, 7561, 7570, 7591, 7601, 7607, 7612, 7618' W/1 SPZ.				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
				7426-7618'	51,500# sd, 45,000 gal. wtr.

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 11-12-81	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
SI 2253	SI 2229	CALCULATED 24-HOUR RATE	After Frac Gauge 758 MCF/D				
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)				TEST WITNESSED BY Lyle Nation			

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

A. P. Lewis

TITLE

Drilling Clerk

DATE 10 November 17, 1981

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

FARMINGTON DISTRICT

BY

S^h

NMOC

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:			38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUBION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH
				TRUE VERT. DEPTH
			O.A.	2799'
			Kirtland	2893'
			Fruitland	3060'
			P.C.	3235'
			Chacra	4126'
			M.V.	4877'
			Men.	4944'
			P.L.	5656'
			Gal.	6476'
			G.H.	7342'
			Gran.	7396'
			Dakota	7553'