

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: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. SF 078913	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Lindrith Unit	
2. NAME OF OPERATOR El Paso Natural Gas Company		7. UNIT AGREEMENT NAME Lindrith Unit	
3. ADDRESS OF OPERATOR P.O. Box 289, Farmington, NM 87401		8. FARM OR LEASE NAME Lindrith Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1840'S, 1040'W At top prod. interval reported below At total depth		9. WELL NO. 107	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT S. Blanco Pic. Cliffs	
15. DATE SPUDDED 5-14-81		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 22, T-24-N, R-3-W NMMPM	
16. DATE T.D. REACHED 5-19-81		12. COUNTY OR PARISH Bla Arriba New Mexico	
17. DATE COMPL. (Ready to prod.) 6-11-81		13. STATE New Mexico	
18. ELEVATIONS (DF, RNB, RT, GR, ETC.) 7138' GL		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 3379'		21. PLUG BACK T.D., MD & TVD 3373'	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-3379'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME AND TVD* 3192'-3243'(PC)		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN DBC-GRS; IES; 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
8 5/8"	24#	175'	12 1/4"
4 1/2"	10.5#	3379'	7 7/8"
29. LINER RECORD		30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
			SCREEN (MD)
			SIZE
			DEPTH SET (MD)
			PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number) 192, 3196, 3202, 3234, 3238, 3242' W/1 SPZ.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3192-3242'		30,000# sd, 35,000 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		HOURS TESTED	
6-11-81			
CHOKE SIZE		PROD'N. FOR TEST PERIOD	
		OIL—BBL. GAS—MCF. WATER—BBL. GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE	
SI 986		SI 994	
CALCULATED 24-HOUR RATE		OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)	
		After Frac Gauge 331 MCF/D	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY Jess Goodwin	
35. LIST OF ATTACHMENTS		RECEIVED FOR RECORD	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <u>D. G. Busco</u>		TITLE <u>Drilling Clerk</u>	
DATE <u>June 16, 1981</u>		DATE <u>June 16, 1981</u>	
FARMINGTON DISTRICT		BY <u>RB</u>	

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

NMMPM

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 23: ~~Submit a separate completion report on this form for each interval to be separately produced.~~ (See instruction for items 22 and 24 above.)

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
				O.A. Kirtland Fruitland Pic. Cliffs	2726' 2906' 3054' 3183'	