

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-080136	
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 Curtis J. Little		7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR P.O. Box 1258 Farmington, NM 87499		8. FARM OR LEASE NAME Salazar Com	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1800' FNL & 1010' FE At top prod. interval reported below Same At total depth Same		9. WELL NO. 9	
14. PERMIT NO. 30-039-23514		10. FIELD AND POOL, OR WILDCAT South Blanco Pictured Cliffs	
DATE ISSUED 7-31-84		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 22-T25N-R6W	
15. DATE SPUDDED 12-27-84		12. COUNTY OR PARISH Rio Arriba	
16. DATE T.D. REACHED 1-3-85		13. STATE NM	
17. DATE COMPL. (Ready to prod.) 1-23-85		19. ELEV. CASINGHEAD 6371	
18. ELEVATIONS (DF, RES, RT, GR, ETC.)* 6379 KB		20. TOTAL DEPTH, MD & TVD 3384	
21. PLUG, BACK T.D., MD & TVD 3345		22. IF MULTIPLE COMPL., HOW MANY* 2	
23. INTERVALS DRILLED BY 0-3384		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Pictured Cliffs 2342-2444	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN IES, GR CNL-Density	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 2342, 44, 46, 48, 50, 52, 54, 56, 58, 60, 62, 64, 2421, 27, 44. (15 holes) 0.33" dia.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 2342-2444 42,000 lb. sand ATP 2100 AMOUNT AND KIND OF MATERIAL USED Acidize 2/500 gal. Frac with and 426 MCF Nitrogen. IR 25 BPM	
33.* PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold 7-day SIP: 691 psi	
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

TITLE Operator

DATE February 21, 1985

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

NMOCC

BY

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.), formations 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 referenced (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, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				
FORMATION	TOP	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	1812	San Jose	0-1812	Same
		Ojo Alamo	1812	Same
		Kirtland	1886	Same
		Pictured Cliffs	2339	Same
		Lewis	2395	Same
		Chacra	3150	Same