

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 _____		7. UNIT AGREEMENT NAME Jicarilla Apache	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESV. ☐ Other _____		8. FARM OR LEASE NAME Jicarilla "G"	
2. NAME OF OPERATOR Socony Mobil Oil Company, Inc.		9. WELL NO. 5	
3. ADDRESS OF OPERATOR 10737 South Shoemaker Ave., Santa Fe Springs, Calif.		10. FIELD AND POOL, OR WILDCAT Tupacito Pictured Cliffs	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1850' North of South Line and 1700' West of East Line, Section 8. At top prod. interval reported below Same At total depth Same		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 8, T 26 N, R 3 W, M27N	
14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH Rio Arriba	
15. DATE SPUNDED 7/5/64		13. STATE New Mexico	
16. DATE T.D. REACHED 7/11/64		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 7090' K.B.	
17. DATE COMPL. (Ready to prod.) 9/4/64		19. ELEV. CASINGHEAD 7080'	
20. TOTAL DEPTH, MD & TVD 3940 Same		21. PLUG, BACK T.D., MD & TVD 3940	
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY 0/3940	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3761/3824 Tupacito Pictured Cliffs		25. WAS DIRECTIONAL SURVEY MADE Deviation Survey Only	
26. TYPE ELECTRIC AND OTHER LOGS RUN _____		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
7-5/8"	24.4	337'	9-7/8"
4-1/2"	9.54	3939'	6-3/4"
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-3/8"	3770		
31. PERFORATION RECORD (Interval, size and number)			
Number of Holes in (). 3761(4), 3769(2), 3800(2), 3802(2), 3804(2), 3806(2), 3808(2), 3812(2), 3816(2), 3818(2), 3824(2). Total 24 Holes.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3761/3824		100,000# 20-40 Sand 73,640 Gal. Water	
33. PRODUCTION			
DATE FIRST PRODUCTION _____		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
DATE OF TEST 9/4/64		WELL STATUS (Producing or shut-in) Waiting on Connection	
HOURS TESTED 3	CHOKE SIZE 0.750	PROD'N. FOR TEST PERIOD →	WATER—BBL. 6895
FLOW. TUBING PRESS. 254	CASING PRESSURE 756	OIL—BBL. →	GAS—MCF. →
CALCULATED 24-HOUR RATE →		OIL GRAVITY-API (CORR.) →	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Will be sold to: El Paso Natural Gas Company			
35. LIST OF ATTACHMENTS Multi-Point Back Pressure Test			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED _____		TITLE District Engineer	
		DATE 9/10/64	

Dist:

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

USGS HNDCC(5), FMB File (1) Fmb. (1)

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	TRUE VERT. DEPTH
Ojo Alamo Kirtland Fruitland	3275 3465	3465 3757		Ojo Alamo Kirtland Fruitland	3275 3465	
Pictured Cliffs Lewis	3757 3825	3825		Pictured Cliffs Lewis	3757 3825	