

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. Contract No. 101			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache			
2. NAME OF OPERATOR UPCON ENERGY CORPORATION		7. UNIT AGREEMENT NAME			
3. ADDRESS OF OPERATOR P.O. Box 808 Farmington, New Mexico 88401		8. FARM OR LEASE NAME Jicarilla Co.			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 900 ft. from North line and 145 ft. from West line. At top prod. interval reported below Same as above. At total depth Same as above.		9. WELL NO. 5			
14. PERMIT NO.		DATE ISSUED			
15. DATE SPUNDED 6/17/78		16. DATE T.D. REACHED 6/21/78			
17. DATE COMPL. (Ready to prod.) 8/9/78		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 1092 Gr.			
19. ELEV. CASINGHEAD 1092		10. FIELD AND POOL, OR WILDCAT Tupacito Pict. Cliffs			
20. TOTAL DEPTH, MD & TVD 3950		21. PLUG, BACK T.D., MD & TVD 3905			
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY to 1950			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Pictured Cliffs 3880 to 3870		25. WAS DIRECTIONAL SURVEY MADE NO			
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electric, compensated density and sonic.		27. WAS WELL CORED NO			
28. CASING RECORD (Report all strings set in well)					
CASING SIZE 4-1/2"	WEIGHT, LB./FT. 21.80	DEPTH SET (MD) 160	HOLE SIZE 7-7/8	CEMENTING RECORD 110 sacks	AMOUNT PULLED NONE
4-1/2"	21.50	3950	7-3/4	578 sacks	NONE
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE 2-1/4"	DEPTH SET (MD) 3880	PACKER SET (MD)			
31. PERFORATION RECORD (Interval, size and number) Holes 2, 3, 4 from 3880 to 3870					
32. ACID SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 3880 up to 3870 AMOUNT AND KIND OF MATERIAL USED 29,000 lbs. water and 30,000 lbs. 2-40 sand.					
33.* PRODUCTION DATE FIRST PRODUCTION 7-10-78 PRODUCTION METHOD (Flowing, gas lift, pumping, etc. and type of pump) oil con. com. pump WELL STATUS (Producing or shut in) Producing					
DATE OF TEST 6/27/78	HOURS TESTED 3	CHOKE SIZE 3-1/4"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 0	GAS—MCF 103
FLOW. TUBING PRESS. 30	CASING PRESSURE 388	CALCULATED 24-HOUR RATE →	OIL—BBL. →	GAS—MCF 103	WATER—BBL. 0
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented					
35. LIST OF ATTACHMENTS					
36. I hereby certify that the foregoing information is complete and correct as determined from all available records. Original Signed By Rudy D. Motto Area Superintendent SIGNED Rudy D. Motto TITLE _____ DATE AUG 11 1978					

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

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, a separate summary record is submitted.

tion 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 completions), consult local state regulations for specific instructions.

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.)

FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS	
					NAME	MEAS. DEPTH
						TRUE VERT. DEPTH
Ojo Alamo			3300			
Piedra Blanca						
Picadero						
Cerro de la Cruz						
San Juan						
San Juan						