

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 _____		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR Supron Energy Corporation						5. LEASE DESIGNATION AND SERIAL NO. Contract No. 150	
3. ADDRESS OF OPERATOR P.O. Box 808, Farmington, New Mexico 87401						6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1160 Ft./S; 1810 Ft./E line At top prod. interval reported below Same as above At total depth Same as above						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						8. FARM OR LEASE NAME Jicarilla "G"	
DATE ISSUED						9. WELL NO. 9-A	
15. DATE SPUDDED 9-13-79						10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde	
16. DATE T.D. REACHED 9-26-79						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 1, T-26N, R-5W N.M.P.M.	
17. DATE COMPL. (Ready to prod.) 3-27-80						12. COUNTY OR PARISH Rio Arriba	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 7321 R.K.B.						13. STATE New Mexico	
19. ELEV. CASINGHEAD 7309		20. TOTAL DEPTH, MD & TVD 8227 MD & TVD		21. PLUG, BACK T.D., MD & TVD 7860 MD & TVD		22. IF MULTIPLE COMPL., HOW MANY* 2	
23. INTERVALS DRILLED BY →		ROTARY TOOLS 0 - 8227		CABLE TOOLS - - -		25. WAS DIRECTIONAL SURVEY MADE No	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5659 - 6209 Mesaverde MD & TVD						27. WAS WELL CORED No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Laterolog and Compensated Neutron Density							
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
10-3/4"		32.75		257		13-3/4"	
7-5/8"		26.40		4329		9-7/8"	
4-1/2"		11.60		5023-7967		6-3/4"	
4-1/2"		10.50		0 - 5023		6-3/4"	
29. LINER RECORD		30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
4-1/2"		Surface		7967		425	
						SCREEN (MD)	
						NO TUBING RUN	
						PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number) 1 - 0.42" hole at each of the following depths: 5659, 5661, 5744, 5746, 5748, 5749, 5773, 5775, 5779, 5781, 6182, 6185, 6188, 6191, 6194, 6196, 6200, 6203, 6206, 6209. (Total of 20 holes)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
5659 - 6209				2000 Gal. 15% HCL, 51,000 gal. 1% KCL water, 50,000 lb. 20-40 sand.			
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		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
3-20-80		3		3/4"		→	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
- - -		208		→		2687	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented		35. LIST OF ATTACHMENTS		TEST WITNESSED BY MAR 31 1980		S. GEOLOGICAL SURVEY DENVER, COLO.	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from		SIGNED Kenneth E. Roddy		TITLE Production Superintendent		DATE 3-28-80	

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

BY McL Kuchera

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, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				TOP	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH
				Cliff House	5655
				Menefee	5800
				Point Lookout	6180