

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☒	DRY ☐			
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	
2. NAME OF OPERATOR J. Gregory Merrion							
3. ADDRESS OF OPERATOR P. O. Box 507, Farmington, New Mexico 87401							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1530' FNL & 800' FWL At top prod. interval reported below Same At total depth Same							
14. PERMIT NO.		DATE ISSUED JAN 6 1982 OIL CON. COM. DIST. 3					
15. DATE SPUDDED 11/9/81		16. DATE T.D. REACHED 11/13/81		17. DATE COMPL. (Ready to prod.) 12/18/81		18. ELEVATIONS (DF, RKR, RT, GR, ETC.)* 6618' GL	
20. TOTAL DEPTH, MD & TVD 2631' KB		21. PLUG, BACK T.D., MD & TVD 2609' KB		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2490' - 2526' Pictured Cliffs						19. ELEV. CASING HEAD 6631' KB	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray-Neutron-Correlation Log						25. WAS DIRECTIONAL SURVEY MADE No	
27. WAS WELL CORED No							
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
7"		87' KB		60 sx 2% CACL ₂			
2-7/8"	6.4 #	2642' KB	5-1/8"	225 sx Class 'B' Econofill followed by 50 sx Class 'H' 2% Gel, 1.22 ft/sx.		1 2.06 ft/sx	
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)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
2522 - 2526 2490 - 2512 & 2510 - 2522				DEPTH INTERVAL (MD)			AMOUNT AND KIND OF MATERIAL USED
				2490 - 2526			750 Gal. 15% HCL Frac w/10,000 lbs. 10/20 sand 71 Bbls 1% KCL Water, 92,000 SCF N ₂
33.* PRODUCTION							
DATE FIRST PRODUCTION 12/18/81		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Shut-in	
DATE OF TEST 12/20/81	HOURS TESTED 48	CHOKE SIZE 1/2"	PROD'N. FOR TEST PERIOD →	OIL—BBL. -0-	GAS—MCF. 364	WATER—BBL. Lt. Mist	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE 54 PSIG	CALCULATED 24-HOUR RATE →	OIL—BBL. -0-	GAS—MCF. 364	WATER—BBL. Lt. Mist	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented						TEST WITNESSED BY Craig Merilatt	
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 [Signature]		TITLE Engineer					
		DATE 12/22/81					

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

NMOCC

FARMINGTON DISTRICT
BY [Signature]

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
Pictured Cliffs	2490	2526	Natural Gas, Salt Water	Ojo Alamo Kirtland Fruitland Pictured Cliffs	1980 2105 2283 2450
					