

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. NM 03560																									
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 El Paso Natural Gas Company				7. UNIT AGREEMENT NAME San Juan 28-7 Unit																									
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico 87401				8. FARM OR LEASE NAME San Juan 28-7 Unit																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1460'S, 870'E At top prod. interval reported below At total depth				9. WELL NO. 177																									
14. PERMIT NO.		DATE ISSUED		10. FIELD AND POOL, OR WILDCAT So. Blanco Pictured Cliffs Largo Chacra Ex.																									
15. DATE SPUDDED 11-13-73		16. DATE T.D. REACHED 12-2-73		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 30, T-27-N, R-7-W																									
17. DATE COMPL. (Ready to prod.) 4-24-74		13. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6611' GL		12. COUNTY OR PARISH Rio Arriba																									
20. TOTAL DEPTH, MD & TVD 4031'		21. PLUG BACK T.D., MD & TVD PC-2998' CH-4020'		13. STATE New Mexico																									
22. IF MULTIPLE COMPL., HOW MANY* _____				19. ELEV. CASINGHEAD																									
23. INTERVALS DELETED _____				25. WAS DIRECTIONAL SURVEY MADE NO																									
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2860-2916' (Pictured Cliffs) 3766-3980' (Chacra)				27. WAS WELL CORED NO																									
26. TYPE ELECTRIC AND OTHER LOGS RUN IES, FDC-GR, Temperature Survey				28. CASING RECORD (Report all strings set in well)																									
<table border="1" style="width:100%"><thead><tr><th>CASINO SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>CEMENTING RECORD</th><th>AMOUNT PULLED</th></tr></thead><tbody><tr><td>9 5/8"</td><td>32.3#</td><td>125' GL</td><td>13 3/4"</td><td>142 cu.ft.</td><td></td></tr><tr><td>2 7/8"</td><td>6.4#</td><td>3009'</td><td>8 3/4"</td><td>523 cu.ft.</td><td></td></tr><tr><td>2 7/8"</td><td>6.4#</td><td>4031'</td><td>7 7/8"-6 3/4"</td><td>447 cu.ft.</td><td></td></tr></tbody></table>						CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	9 5/8"	32.3#	125' GL	13 3/4"	142 cu.ft.		2 7/8"	6.4#	3009'	8 3/4"	523 cu.ft.		2 7/8"	6.4#	4031'	7 7/8"-6 3/4"	447 cu.ft.	
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31. PERFORATION RECORD (Interval, size and number)																													
(PC) 2860-80', 2896-2916' with 20 shots per zone. (CH) 3766-78', 3838-48' 3972-80' with 12 shots per zone.																													
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																													
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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 PC-4-17-74 CH-4-24-74	HOURS TESTED 3 hours	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.																								
FLOW. TUBING PRESS.	CASING PRESSURE PC-SI-687 CH-SI-1037	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF. PC-3426 MCF/D AOF CH-622 MCF/D AOF	WATER—BBL.																								
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					OIL GRAVITY-API (CORR.)																								
35. LIST OF ATTACHMENTS					TEST WITNESSED BY Norton & Hardy																								
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																													
SIGNED <u>A. P. Diarco</u>		TITLE <u>Drilling Clerk</u>		DATE <u>4-26-74</u>																									

*(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, 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 (SED. TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES					
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		

38. GEOLOGIC MARKERS			
NAME	TOP		TRUE VERT. DEPTH
	MEAS. DEPTH		
Pictured Cliffs Chacra	2854'	3836'	