

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. SF079363	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBAL NAME	
2. NAME OF OPERATOR El Paso Natural Gas Company		7. UNIT AGREEMENT NAME San Juan 28-6 Unit	
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, NM 87401		8. FARM OR LEASE NAME San Juan 28-6 Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1190'S, 1646'E At top prod. interval reported below At total depth		9. WELL NO. 193	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT South Blanco PC	
15. DATE SPUDDED 05-07-74		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 12, T-27-N, R-6-W N.M.P.M.	
16. DATE T.D. REACHED 05-12-74		12. COUNTY OR PARISH Rio Arriba	
17. DATE COMPL. (Ready to prod.) 10-03-74		13. STATE New Mexico	
18. ELEVATIONS (DF, RKB, RT, OR, ETC.)* 6706' GL		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 3591'		21. PLUG BACK T.D., MD & TVD 3580'	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY ROTARY TOOLS 0-3591	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3330-3398' (PC)		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN IES, FDC-GR, Temp. Survey		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8"	24#	128'	12 1/4"
2 7/8"	6.4#	3591'	7 7/8" & 6 3/4"
CEMENTING RECORD		AMOUNT PULLED	
112 cu. ft.			
361 cu. ft.			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD		PACKER SET (MD)	
SIZE	DEPTH SET (MD)		
Tubingless			
31. PERFORATION RECORD (Interval, size and number)			
3330-46', 3370-78', 3390-98' with 16 shots per zone.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3330-3398'		40,000# sand; 39,984 gal wtr	
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 10-03-74	HOURS TESTED 3 hours	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD
FLOW. TUBING PRESS.	CASING PRESSURE SI 631	CALCULATED 24-HOUR RATE	OIL—BBL. GAS—MCF. WATER—BBL.
84. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		* 719 MCF/D-AOF	
85. LIST OF ATTACHMENTS		TEST WITNESSED BY Don Norton	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <u>M. G. Lucco</u>		TITLE <u>Drilling Clerk</u>	
		DATE <u>October 25, 1974</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 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 Cliff	3330	