

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved
Budget Bureau No. 42-R-5557

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- in ☐	Plug back ☐	Diff. serve ☐	Other ☐		
2. NAME OF OPERATOR Mobil Producing TX. & N.M. Inc.									
3. ADDRESS OF OPERATOR Nine Greenway Plaza, Suite 2700, Houston, Texas 77046									
4. LOCATION OF WELL (Report location clearly and in accordance with the State mapping laws) At surface 1520' FSL & 790' FEL At top prod. interval reported below Same as surface At total depth Same as surface									
14. PERMIT NO. U.S. GEOLOGICAL SURVEY FARMINGTON, N.M.									
15. DATE STARTED		16. DATE TO BE REACHED		17. DATE COMPLETED (Ready to prod.)		18. ELEVATIONS (At well, at gr. etc.)		19. U.S. CASING	
12-9-81		12-20-81		2-5-82		7026' GR			
20. TOTAL DEPTH, M. & TV		21. PLUG BACK TO, MD & TV		22. IF MULTIPLE COMPLEMENTS, HOW MANY?		23. INTERVALS (Feet)		24. PERCENT INTERVALS FOR THIS WELL (No. of all bottom name and number)	
6100		6040				X			
25. TYPE ELECTRIC AND OTHER LOGS Cliffhouse 5564-5586, Point Lookout 5842-6024, Menefee 5632-5776 Comp N-Form Den. Log								26. WAS WELL CORRECTED? No	
27. WAS WELL CORRECTED? No									
28. CASING RECORD (Report all strings set in well)								AMOUNT OF CEMENT	
CASING SIZE		WEIGHT LB. FT.		DEPTH SET (MD)		H. I. SIZE		AMOUNT OF CEMENT	
8-5/8		20		362		12-1/4		250x Class B	
5-1/2		15.5		6082		7-7/8		1610x Class D	
								NA	
								NA	
29. LINER RECORD								TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT		SCREEN (MD)	
30. PERFORATION RECORD (Interval, size and number)								31. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
1 JS/2' 5842-56, 5866-72, 5902-06, 5912-18, 5954-58, 5970-76, 5986-96, 6018-24, 37 Holes								DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED	
								5842-6024 2500 gals 15% DINE HCl, 60 RCNBS Fract w/ich. 86,400 gals. at 2.5 #/gal slick water 72,400 # 20-40 sd.	
32. PRODUCTION								33. WELL STATUS (Producing or shut-in)	
DATE FIRST PRODUCTION 2-5-82								Producing (Test allowable)	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)									
Flowing									
DATE OF TEST		HOURS TESTED		CHOSE SIZE		PROG. P.R. TEST PERIOD		WATER—BBL.	
2-5-82		24		24/64		0		687	
FLOW. TUBING PRESS.		CASING PRESS. LB.		CALCULATED 24-HOUR RATE		GAS—MCF.		WATER—BBL.	
340		450		0		687		6	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)								35. LIST OF ATTACHMENTS	
Vented								2 sets of logs, inclination survey	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available data.									
SIGNED Jimmy A. Maje								TITLE Authorized Agent	
BY D. R. Wenzel								DATE 2-8-82	

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

NMOCC

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

38. GEOLOGIC MARKERS

NAME	MEAN. DEPTH	TOP	TRUE VERT. DEPTH
Ojo-Alamo	3204		
Kirtland-Fruit-lands	3446		
Pictured Cliffs	3702		
Lewis	3802		
Cliffhouse	5550		
Menefee	5590		
Point Lookout	5802		
Mancos	6029		