

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

Jerome P. McHugh

3. ADDRESS OF OPERATOR

Box 234, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 1730' FNL - 1070' FEL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

San Juan

13. STATE

NM

15. DATE SPUDDED

8-18-76

16. DATE T.D. REACHED

8-24-76

17. DATE COMPL. (Ready to prod.)

2-2-78

18. ELEVATIONS (DF, REB, RT, GR, ETC.)*

6131' GR

20. TOTAL DEPTH, MD & TVD

1440'

21. PLUG, BACK T.D., MD & TVD

1372'

22. IF MULTIPLE COMPL., HOW MANY*

Single

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0-1440'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Pictured Cliffs 1225 - 1308'

26. TYPE ELECTRIC AND OTHER LOGS RUN

IES and Correlation

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
5-1/2	14#	39' GR	7-7/8	8 SX	---
2-7/8	6.5#	1418' GR	4-3/4	90 SX	---

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1-1/2	1335'	

31. PERFORATION RECORD (Interval, size and name)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
2- 2-1/8 glass jets/ft	
1234-1238	DEPTH INTERVAL (MD)
1304-1308 1225-1229	AMOUNT AND KIND OF MATERIAL USED
	See Sundry Notice

33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
		Flowing				Shut-in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
5-10-78	24		→	—	10	8	—
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
-0-	212 SI	→	—	10	8	61.6	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

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 Thomas A. Dugan TITLE Petroleum Engineer DATE JUN 20 1978

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

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 other reports, including those submitted by other operators, must be submitted with this report.

[illegible]

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. All attachments should be listed on this form, see item 33.

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. Consult local State or Federal office for specific instructions.

Item 29: "Sacks Cement": Attached supplemental records for each additional interval to be separately produced, showing the additional data pertinent to such 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. as 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 spaces on this form and in any attachments.

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. (See instruction for Item 33.)

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for Item 30.)

7. SUMMARY OF POROUS ZONES:

MAF 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.		GEOLOGIC MARKERS	
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH	
				Log Tops			
				Ojo Alamo	554'		
				Kirtland	658'		
				Fruitland	1226'		
				Pictured Cliffs	1339'		