

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

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 ☐	DEEPEN ☐	PLUG BACK ☐
		DIFF. RESVR. ☐	Other ☐		
2. NAME OF OPERATOR Supron Energy Corp. % John H. Hill, et al					
3. ADDRESS OF OPERATOR Suite 020, Kysar Building 300 W. Arrington, Farmington, New Mexico 87401					
4. LOCATION OF WELL (Report location clearly and in accordance with instructions on reverse side) At surface 1850' FSL & 790' FWL (NW SW) At top prod. interval reported below At total depth					
14. PERMIT NO. U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.					
5. DATE SPUNDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)	
8/4/81		8/9/81		8/31/81	
20. TOTAL DEPTH, MD & TVD		21. PLUG BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*	
3001' MD		2853' MD		Single	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION (TOP, BOTTOM, NAME (MD AND TVD)*)				25. WAS DIRECTIONAL SURVEY MADE	
2230 - 2260 Pictured Cliffs				No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Correlation and CCL				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
8 5/8"	24#	203'	12 1/4"	225 sx. Class "B"	-0-
2 7/8"	6.4#	2885'	7 7/8"	925 sx. 50/50 Poz	-0-
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
31. PERFORATION RECORD (Interval, size and number)					
2230, 32, 36, 38, 40, 42, 52, 54, 56, 58, 60. 11 Holes with .33" Bywire Gun					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
2230 - 2260		1512 gals. 15% HCL Acid			
		13,314 gals. 70% Quality Foam			
		38,861# 10/20 Sand			
33. PRODUCTION					
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping - size and type of pump)			WELL STATUS (Producing or shut in)	
8/31/81	Flowing			Shut-In	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL BBL.	GAS MCF/D
8/31/81	3 hours	.75	→		226
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24 HOUR RATE	OIL FRL	GAS MCFE	WATER BBL.
	7	→		226	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
Vented					
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 _____ TITLE Drilling/Prod. Manager DATE September 10, 1981

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

NMOCC

BY

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 25.

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 states 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 production interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 23. 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: "Stack Completion" 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.)

57. SUMMARY OF POROUS ZONES

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING IN-DEPTH INTERVAL TESTS, CUSHION TESTS, TIME TOOL-OPEN, FLOWING, AND SHUT-IN PRESSURES, AND RECOVERIES

GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE DEPTH
OJO Alamo		1145	Water			
Kirtland	1350		Water			
Fruitland	1510		Water			
Pictured Cliffs	2195		Gas			

