

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.7.

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 Southland Royalty Company						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Drawer 570, Farmington, NM 87401						8. FARM OR LEASE NAME McClanahan	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1520' FNL & 960' FWL At top prod. interval reported below At total depth						9. WELL NO. #16E	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED 12-18-79						18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5756' GR	
16. DATE T.D. REACHED 12-26-79		17. DATE COMPL. (Ready to prod.) 3-10-80		19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 6488'	
21. PLUG, BACK T.D., MD & TVD 6480'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY Rotary		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Dakota: 6246' - 6417'	
25. WAS DIRECTIONAL SURVEY MADE Deviation						26. TYPE ELECTRIC AND OTHER LOGS RUN GR-CCL, CR-Density, CBL and Temperature 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#		223'		12 1/4"	
5 1/2"		15.5#		6487'		7 7/8"	
						140 sx	
						210 sx Stage One	
						225 sx Stage Two	
						180 sx Stage Three	
29. LINER RECORD						30. TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		SIZE	
						2 3/8"	
						6446'	

31. PERFORATION RECORD (Interval, size and number)						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
Upper Dakota: 6246', 6255', 6259', 6315', 6321', 6326', 6334', (7 holes)						DEPTH INTERVAL (MD)	
Lower Dakota: 6374', 6404', 6408', 6417' (4 holes)						6246'-6334'	
						6374'-6417'	
						AMOUNT AND KIND OF MATERIAL USED	
						6,550 gals 30# gel pad, 41,700 gals 30# gel wtr & 35,200# 20/40 sd	
						28,500 gals 30# gel wtr & 22,000# 20/40 sd	
33. PRODUCTION						34. DISPOSITION OF GAS (Solid, used for fuel, vented, etc.)	
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 3-10-80		HOURS TESTED 3 hours		CHOKE SIZE 3/4"		PROD'N. FOR TEST PERIOD OIL—BBL. GAS—MCF.	
FLOW. TUBING PRESS. 58		CASING PRESSURE 174		CALCULATED 24-HOUR RATE OIL—BBL. GAS—MCF.		WATER—BBL. OIL—BBL. GAS—OIL RATIO	
						825	
35. LIST OF ATTACHMENTS SOLD						36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
SIGNED _____						TITLE District Production Manager DATE 3-20-80	

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

NMCCG

M.L. Zuckera

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
Ojo Alamo	934'					
Fruitland	1532'					
Pict. Cliffs	1900'					
Cliff House	3453'					
Pt. Lookout	4150'					
Gallup	5370'					
Graneros	6243'					
Dakota	6311'					