

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 El Paso Natural Gas Company						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 990, Farmington, NM 87401						8. FARM OR LEASE NAME Lloyd A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1530'N, 1100'E At top prod. interval reported below At total depth						9. WELL NO. 3 (PC-CH)	
14. PERMIT NO.						12. COUNTY OR PARISH San Juan	
DATE ISSUED						13. STATE New Mexico	
15. DATE SPUDDED 02-11-75	16. DATE T.D. REACHED 02-18-75	17. DATE COMPL. (Ready to prod.) 11-13-75	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5805' GL			19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 3189'	21. PLUG. BACK T.D., MD & TVD PC-2206-CH-3179	22. IF MULTIPLE COMPL., HOW MANY? 2	23. INTERVALS DRILLED BY →	ROTARY TOOLS 0-3189	CABLE TOOLS		
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (and sand type) 2034-70' (PC) 3057-3140' (CH)						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN IEL; CDL-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)		CEMENTING RECORD	
9 5/8"		32.3#		137'		126 cu. ft.	
2 7/8"		6.4#		2216'		779 cu. ft.	
2 7/8"		6.4#		3189'		307 cu. ft.	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		PACKER SET (MD)	
						Tubingless	
30. TUBING RECORD							
31. PERFORATION RECORD (Interval, size and number) 2034-36', 2052-54', 2068-70' with 2 shots per zone. 3057-61', 3136-40' with 3 shots per zone.							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
2034-2070'				28,000# sand; 28,140 gal wtr.			
3057-3140'				18,000# sand; 19,600 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) SI	
DATE OF TEST PC--11-13-75 CH--11-06-75		HOURS TESTED 3 hours		CHOKE SIZE 3/4"		PROD'N. FOR TEST PERIOD →	
FLOW. TUBING PRESS. PC--SI-0 CH--SI-1017		CASING PRESSURE PC--SI-0 CH--SI-1017		CALCULATED 24-HOUR RATE →		OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) PC--TSM CH--601 MCF/D-AOF						TEST WITNESSED BY R. Hardy	
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 <u>A. P. Duess</u>		TITLE <u>Drilling Clerk</u>				DATE <u>December 19, 1975</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:				38. GEOLOGIC MARKERS	
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				NAME	MEAS. DEPTH
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		
				PC CH	2025' 3036'