

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

|   |                 |  |  |  |               |
|---|-----------------|--|--|--|---------------|
| 1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____   |                 |  |  | 5. LEASE DESIGNATION AND SERIAL NO.<br><b>SF 077865</b>                                      |               |
| b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____                        |                 |  |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME   |               |
| 2. NAME OF OPERATOR<br><b>Supron Energy Corporation</b>   |                 |  |  | 7. UNIT AGREEMENT NAME   |               |
| 3. ADDRESS OF OPERATOR<br><b>P.O. Box 808, Farmington, New Mexico 87401</b>   |                 |  |  | 8. FARM OR LEASE NAME<br><b>Albright</b>   |               |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*<br>At surface <b>1470'/North; 850'/West Line</b><br>At top prod. interval reported below <b>Same as above</b><br>At total depth <b>Same as above</b>   |                 |  |  | 9. WELL NO.<br><b>2-J</b>  |               |
| 14. PERMIT NO. _____ DATE ISSUED _____  |                 |  |  | 10. FIELD AND POOL, OR WILDCAT<br><b>Aztec Pictured Cliffs</b>                               |               |
| 15. DATE SPUDDED <b>7/10/79</b> 16. DATE T.D. REACHED <b>7/16/79</b> 17. DATE COMPL. (Ready to prod.) <b>10/2/79</b> 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* <b>5658 R.K.B.</b> 19. ELEV. CASINGHEAD <b>5649</b>                                    |                 |  |  | 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA<br><b>Sec. 22, T-29N, R-10W N.M.P.M.</b>   |               |
| 20. TOTAL DEPTH, MD & TVD <b>3225 MD &amp; TVD</b> 21. PLUG, BACK T.D., MD & TVD <b>3183 MD &amp; TVD</b> 22. IF MULTIPLE COMPL., HOW MANY* <b>2</b> 23. INTERVALS DRILLED BY <b>0 - 3225</b> ROTARY TOOLS <b>0 - 3225</b> CABLE TOOLS <b>- - -</b> |                 |  |  | 12. COUNTY OR PARISH<br><b>San Juan</b> 13. STATE<br><b>New Mexico</b>                       |               |
| 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*<br><b>2006 - 2038 MD &amp; TVD</b>  |                 |  |  | 25. WAS DIRECTIONAL SURVEY MADE<br><b>No</b>   |               |
| 26. TYPE ELECTRIC AND OTHER LOGS RUN<br><b>Induction Electric, Gamma Ray Density</b>  |                 |  |  | 27. WAS WELL CORED<br><b>No</b>  |               |
| 28. CASING RECORD (Report all strings set in well)  |                 |  |  |  |               |
| CASING SIZE   | WEIGHT, LB./FT. | DEPTH SET (MD)                         | HOLE SIZE  | CEMENTING RECORD   | AMOUNT PULLED |
| 7-5/8"  | 26.40           | 275                                    | 12-1/4"  | 200 Sx.  |               |
| 4-1/2"  | 9.50            | 3225                                   | 6-3/4"   | 300 Sx.  |               |
| 29. LINER RECORD  |                 |  |  |  |               |
| SIZE  | TOP (MD)        | BOTTOM (MD)                            | SACKS CEMENT*  | SCREEN (MD)  |               |
|   |                 |  |  |  |               |
| 30. TUBING RECORD   |                 |  |  | 31. PERFORATION RECORD (Interval, size and number)   |               |
| SIZE  | DEPTH SET (MD)  | PACKER SET (MD)                        | 11 - 0.42" holes from 2006 to 2038                                   |  |               |
| NO TUBING   |                 | 3006                                   | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.                       |  |               |
|   |                 |  | DEPTH INTERVAL (MD)  | AMOUNT AND KIND OF MATERIAL USED   |               |
|   |                 |  | 2006 - 2038  | 6917 gal. 2% KCL Water, 263, 201 SCF of Nitrogen, 30,000 lb. 20-40 Sand. 300 gal. 7-1/2% HCL |               |
| 33.* DATE FIRST PRODUCTION  |                 |  | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) |  |               |
|   |                 |  | WELL STATUS (Producing or shut-in)<br><b>Shut-In</b>                 |  |               |
| DATE OF TEST  | HOURS TESTED    | CHOKE SIZE                             | PROD'N. FOR TEST PERIOD  | OIL—BBL.   | GAS—MCF.      |
| 10-2-79   | 3               | 3/4"                                   |  |  |               |
| FLOW. TUBING PRESS.   | CASING PRESSURE | CALCULATED 24-HOUR RATE                | OIL—BBL.   | GAS—MCF.   | WATER—BBL.    |
| - - -   | 38              |  |  | 608  |               |
| 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)<br><b>Vented</b>   |                 |  |  | TEST WITNESSED BY<br><b>Randy Martinez</b>   |               |
| 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 <b>Kenneth E. Roddy</b>  |                 | TITLE <b>Production Superintendent</b> |  | DATE <b>10-3-79</b>  |               |

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

W10000

**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 (4-11) must be submitted.

tion 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 16: 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 zone (interval) for which the well is completed.

**Item 29:** "Sample Comments". Attached immediately following Item 29 is 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 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

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

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