

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 ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. SF 073389																							
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																							
2. NAME OF OPERATOR El Paso Natural Gas Company		7. UNIT AGREEMENT NAME																							
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico 87401		8. FARM OR LEASE NAME Lucerne A																							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 591'S, 1090'W At top prod. interval reported below At total depth		9. WELL NO. 3																							
14. PERMIT NO.		DATE ISSUED MAY 1 1970																							
15. DATE SPUDDED W/O 3-22-70		16. DATE T.D. REACHED W/O 3-31-70																							
17. DATE COMPL. (Ready to prod.) 4-13-70		18. ELEVATIONS (DF, REB, RT, OR, ETC.)* 5233' GL																							
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD k 5658																							
21. PLUG, BACK T.D., MD & TVD 5340		22. IF MULTIPLE COMPL., HOW MANY*																							
23. INTERVALS DRILLED BY		ROTARY TOOLS 0 - 5658																							
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4794-5810' (Nasa Verde)		25. WAS DIRECTIONAL SURVEY MADE No																							
26. TYPE ELECTRIC AND OTHER LOGS RUN IEL, Density, Temp. Survey		27. WAS WELL CORRED No																							
28. CASING RECORD (Report all strings set in well)																									
CASING SIZE		WEIGHT, LB./FT.																							
DEPTH SET (MD)		HOLE SIZE																							
CEMENTING RECORD		TUBING RECORD																							
9 5/8'		36		163'		13 3/4"		25 125 Sks.																	
7'		20 & 23		4530'		8 3/4"		500 Sks.																	
4 1/2'		10.5		5656'		6 1/4"		125 Sks.																	
29. LINER RECORD		30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		33. PRODUCTION																	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		AMOUNT AND KIND OF MATERIAL USED		DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in)					
2 3/8'		5565'		4794-4800,		4853-62, 4376-85, 4903-12, 4924-30', 5298-5304, 5336-48, 5352-68, 5398-5404, 5419-25', 5469-75, 5511-17, 5549-58, 5572-78, 5604-10'		All zones w/ 18 SPZ		25.33		9413 MCF/D - A.O.F.		38.4		4-13-70		3		3/4"		Flowing		Shut In	
SI 441		51772		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.		OIL GRAVITY-API (CORR.)		TEST WITNESSED BY		D. R. Roberts		35. LIST OF ATTACHMENTS		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					

*(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, whether 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 showing 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			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
				Pictured Cliffs	3045	
				Cliff House	4932	
				Aeneffee	4844	
				Point Lookout	5305	
				Ancos	5415	