

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 _____		5. LEASE DESIGNATION AND SERIAL NO. SF 078604	
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 Scott	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1750'S, 1650'W At top prod. interval reported below At total depth		9. WELL NO. 6 (JWA O)	
14. PERMIT NO.		DATE ISSUED APR 16 1970	
15. DATE SPUDDED W/O 3-13-70		16. DATE T.D. REACHED 3-18-70	
17. DATE COMPL. (Ready to prod.) 4-1-70		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5674X GL	
19. ELEV. CASINGHEAD		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde	
20. TOTAL DEPTH, MD & TVD 5417'		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 4, T-31-N, R-10-W N.M.P.M.	
21. PLUG, BACK T.D., MD & TVD 5400'		12. COUNTY OR PARISH San Juan	
22. IF MULTIPLE COMPL., HOW MANY*		13. STATE New Mexico	
23. INTERVALS DRILLED BY 0-5417'		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4588 - 5362' (Mesa Verde)	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN IEL, DLC/GR, Temp. Log	
27. WAS WELL CORRED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 4588-52', 4608-20', 5044-53', 5084-53', 5112-18', 5128-34', 5146-52', 5185-91', 5213-22', 5261-67', 5297-5306', 5356-62', w/18 SPZ		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 4588-4620 21,750 gal. water, 20,000# sand 5044-5152 38,550 gal. water, 44,000# sand 5185-5362 36,110 gal. water, 33,000# sand	
33.* PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) Shut in		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY J. B. Goodwin	
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 Petroleum Engineer	
DATE 4-13-70		DATE 4-13-70	

*(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: 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	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			Pictured Cliffs	2734	
			Cliff House	4306	
			Menafee	4531	
			Point Lookout	5022	
			Mancos	5122	