

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.6.

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								5. LEASE DESIGNATION AND SERIAL NO.			
EL PASO NATURAL GAS CO.								SF 078389			
3. ADDRESS OF OPERATOR								6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
BOX 289, FARMINGTON, NEW MEXICO											
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*								7. UNIT AGREEMENT NAME			
At surface 980'W, 800'W								8. FARM OR LEASE NAME			
At top prod. interval reported below								Lucerne A			
At total depth								9. WELL NO.			
								6			
14. PERMIT NO.								10. FIELD AND POOL, OR WILDCAT			
DATE ISSUED								Blanco PC			
15. DATE SPUDDED								11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA			
4/13/78								Sec. 3, T-31-N, R-10-W			
16. DATE T.D. REACHED								NMPM			
4/18/78											
17. DATE COMPL. (Ready to prod.)								12. COUNTY OR PARISH			
9/26/78								San Juan			
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*								13. STATE			
6192' GL								New Mexico			
19. ELEV. CASINGHEAD											
20. TOTAL DEPTH, MD & TVD								24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*			
3255'								3015-3101 (PC)			
21. PLUG, BACK T.D., MD & TVD								25. WAS DIRECTIONAL SURVEY MADE			
3244'								No			
22. IF MULTIPLE COMPL., HOW MANY*								26. TYPE ELECTRIC AND OTHER LOGS RUN			
								IEL-GR; CDL-GR; Cement Bond Log, Correlation Log; Temp. Survey			
23. INTERVALS DRILLED BY								27. WAS WELL CORED			
ROTARY TOOLS								No			
CABLE TOOLS											
0-3255'											
28. CASING RECORD (Report all strings set in well)											
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
8 5/8"		24#		133'		12 1/4"		177 cf.			
2 7/8"		6.4#		3255'		6 3/4"		610 cf.			
29. LINER RECORD										30. TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE	
										DEPTH SET (MD)	
										PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number)										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
3015,3028,3034,3040,3053,3060,3093,3101 with 1 SPZ.										DEPTH INTERVAL (MD)	
										3015-3101	
										AMOUNT AND KIND OF MATERIAL USED	
										75,000# 10/20 sand; 11,150 gal. Foam water	
33.* PRODUCTION											
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)						WELL STATUS (Producing or shut-in)			
		After Frac Gauge - 2185 MCF/D						Shut In			
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.	
9/26/78										WATER—BBL.	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.	
		SI 605								OIL GRAVITY-APL. (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)										TEST WITNESSED BY	
										J. Thurstonson	
35. LIST OF ATTACHMENTS										OCT 26 1978	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records										OIL CON. COM.	
SIGNED <u>A. G. Duco</u>										DIST. 3	
TITLE <u>Drilling Clerk</u>										DATE <u>10/17/78</u>	

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

NMOCC

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				PC	3004	