

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 _____		7. UNIT AGREEMENT NAME _____	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		8. FARM OR LEASE NAME _____	
2. NAME OF OPERATOR Southland Royalty Company		9. WELL NO. 4A	
3. ADDRESS OF OPERATOR P. O. Drawer 570, Farmington, New Mexico		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1640' FSL & 1010' FEL At top prod. interval reported below At total depth		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 24-31N-12W	
14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH San Juan	
15. DATE SPUDDED 1-30-78		13. STATE New Mexico	
16. DATE T.D. REACHED 2-7-78		19. ELEV. CASINGHEAD 5993' GR	
17. DATE COMPL. (Ready to prod.) 3-11-78		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5993' GR	
20. TOTAL DEPTH, MD & TVD 5133'		21. PLUG, BACK T.D., MD & TVD 5035'	
22. IF MULTIPLE COMPL., HOW MANY* —>—		23. INTERVALS DRILLED BY ROTARY TOOLS 0-5133'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4770' - 5025' (Mesa Verde)		25. WAS DIRECTIONAL SURVEY MADE Deviation	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Density, Gamma Ray Correlation, Gamma Ray Neutron		27. WAS WELL CORRED no	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
9-5/8"	36#	221'	13-3/4"
7"	20#	2794'	8-3/4"
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
4-1/2	2597'	5076'	385
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-3/8"	5014'	---	
31. PERFORATION RECORD (Interval, size and number)			
4770, 4786, 4792, 4800, 4810, 4819, 4825, 4835, 4841, 4847, 4853, 4859, 4871, 4878, 4891, 4913, 4918, 5007, 5021, 5025.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4770-5025'		123,000 gals water	
		61,500# 20/40 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	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD
3-28-78	3 hrs	3/4"	—>—
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)
276	610	—>—	4,952
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold			
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 District Production Mgr.	
		DATE March 30, 1978	

*(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	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	1257'					
Fruitland	2081'					
Pictured Cliffs	2493'					
Cliff House	4014'					
Point Lookout	4778'					