

Copy to SF

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 <input type="checkbox"/>		7. UNIT AGREEMENT NAME									
b. TYPE OF COMPLETION:		NEW WELL <input type="checkbox"/>		WORK OVER <input type="checkbox"/>		DEEP-EN <input type="checkbox"/>		PLUG BACK <input type="checkbox"/>		DIFF. RESVR. <input type="checkbox"/>		Other <input type="checkbox"/>		Rocky Arroyo					
2. NAME OF OPERATOR		El Paso Natural Gas Company										S. FARM OR LEASE NAME							
3. ADDRESS OF OPERATOR		1800 Wilco Bldg. Midland, Texas 79701										Rocky Arroyo "E"							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 1980 FNL, 2130 FEL										9. WELL NO.							
At top prod. interval reported below		At total depth										10. FIELD AND POOL, OR WILDCAT							
14. PERMIT NO.		DATE ISSUED										11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA							
15. DATE SPUDDED		16. DATE T.D. REACHED										17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*		19. ELEV. CASINGHEAD			
12-27-78		1-30-74										2-28-74		4620.3 Gr.					
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD										22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS		CABLE TOOLS	
9258		-9204														XX			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		25. WAS DIRECTIONAL SURVEY MADE										26. TYPE ELECTRIC AND OTHER LOGS RUN		27. WAS WELL CORED					
Wolfcamp 4720-6945		No										CNL-FD, DLL, MLL		No					
28. CASING RECORD (Report all strings set in well)																			
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED									
9 5/8		40		1840		12 1/4		590											
7"		26		9258		8 1/2		1580											
29. LINER RECORD														30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)					
										2 3/8		6330							
31. PERFORATION RECORD (Interval, size and number)														32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
17 holes @ 6227-6320														DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
														Frac w/40,000 gals acid w/18,000# 20-40 Sd,					
														5000# UCAR props w/290,000 SCF N ₂ .					
33.* PRODUCTION																			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)										WELL STATUS (Producing or shut-in)							
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.		WATER—BBL.		GAS-OIL RATIO					
2-28-74		4		5/16		→		---		3850									
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.		GRAVITY-API (CORR.)							
1329		1396		→		-----		20,825											
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)														TEST WITNESSED BY					
Vented														MAR 14 1974					
35. LIST OF ATTACHMENTS														U. S. GEOLOGICAL SURVEY		ARTESIA, NEW MEXICO			
36. I hereby certify that the foregoing and attached information is complete and correct as determined by available records																			
SIGNED		C. D. Kjaer										TITLE		Production Clerk		DATE		3-13-74	

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

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.)

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

GEOLOGICAL SURVEY
 DEPARTMENT OF THE INTERIOR
 OFFICE OF MINERAL RESOURCES