

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. Jicarilla Tribal 360	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
2. NAME OF OPERATOR PAN AMERICAN PETROLEUM CORPORATION				7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, New Mexico				8. FARM OR LEASE NAME Jicarilla Tribal 360	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 790' TEL & 790' TEL, Unit A. At top prod. interval reported below Same. At total depth Same.				9. WELL NO. 3	
14. PERMIT NO.				DATE ISSUED	
15. DATE SPUDDED 7-26-69		16. DATE T.D. REACHED 7-29-69		17. DATE COMPL. (Ready to prod.) 8-14-69	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* GL 7152' - RKB 7163'		19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD 2790'		21. PLUG BACK T.D., MD & TVD 2730'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY 0-TD		ROTARY TOOLS		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2658'-82' - Pictured Cliffs				25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Electrical Survey				27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
8-5/8"		244		203	
4-1/2"		10.5#		2766	
HOLE SIZE		CEMENTING RECORD			
12-1/4"		150 sacks			
6-3/4"		425 sacks			
29. LINER RECORD					
SIZE		TOP (MD)		BOTTOM (MD)	
SACKS CEMENT*		SCREEN (MD)			
30. TUBING RECORD					
SIZE		DEPTH SET (MD)		PACKER SET (MD)	
1-1/4"		2652		2652	
31. PERFORATION RECORD (Interval, size and number)					
2658' - 82' w/ 2 SPF					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
2658'-82'		250 gal 15% Acid. Frac w/			
		20,000# 20-40 #s,			
		10,000# 10-20 #s.			
33.* PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in)	
		Flowing		Shut-in.	
DATE OF TEST		HOURS TESTED		CHOKE SIZE	
8-21-69		3		3/4"	
PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.	
FLOW. TUBING PRESS.		FLOW. PRESSURE		CALCULATED 24-HOUR RATE	
442 psig		387 psig			
OIL—BBL.		GAS—MCF.		WATER—BBL.	
		4930 (AOP 7759) MCFD			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
TEST WITNESSED BY					
35. LIST OF ATTACHMENTS					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
Original Signed By					
SIGNED G. W. EATON, JR.		TITLE Area Engineer		DATE 8-9-69	

*(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	TOP TRUE VERT. DEPTH
Pictured Cliffs	2658'	2682'	Natural Gas.	Pictured Cliffs	2652'	