

Form approved.
Budget Bureau No. 42-R355.5.

(See other instructions on reverse side)

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 McCRODEN	
2. NAME OF OPERATOR SOUTHERN UNION PRODUCTION COMPANY		9. WELL NO. 3	
3. ADDRESS OF OPERATOR P. O. Box 808; FARMINGTON, NEW MEXICO		10. FIELD AND POOL, OR WILDCAT TAPACITO PICTURED CLIFFS	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1000 FT. FROM SOUTH AND 1670 FEET FROM EAST LINE. At top prod. interval reported below SAME AS ABOVE At total depth SAME AS ABOVE		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA SEC. 3, T-25-N, R-3-E, N.M.P.M.	
14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH RIO ARriba	
15. DATE SPUDDED 8/25/64		13. STATE NEW MEXICO	
16. DATE T.D. REACHED 8/31/64		19. ELEV. CASINGHEAD 7242	
17. DATE COMPL. (Ready to prod.) 9/16/64		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 7252 FT. D.F.	
20. TOTAL DEPTH, MD & TVD 3865 MD&TVD		21. PLUG, BACK T.D., MD & TVD 3830 MD&TVD	
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY 0-3865	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3780-3808 - PICTURED CLIFFS		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN E. S. INDUCTION & GAMMA-RAY CORRELATION LOG		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
7-5/8"	26.40#	195 FT.	11"
4-1/2"	9.50	3864 FT.	63/4"
CEMENTING RECORD		AMOUNT PULLED	
125 SACKS		600 SACKS	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD		FACER SET (MD)	
SIZE	DEPTH SET (MD)		
1-1/2" BUE	3727		
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
PERFORATED 1 SHOT/FT. 3780-3808 0.48 HOLE SIZE.		DEPTH INTERVAL (MD)	
		3780-3808	
		AMOUNT AND KIND OF MATERIAL USED	
		SAND WATER FRAC w/60,000# SAND AND 47,880 GALLONS WATER	
33.* PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
DATE OF TEST		WELL STATUS (Producing or shut-in)	
9/26/64		SHUT-IN	
HOURS TESTED		GAS—MCF.	
3		128 MCF	
CHOKE SIZE		WATER—BBL.	
3/4"			
FLOW. TUBING PRESS.		OIL GRAVITY-API (CORR.)	
74			
CASING PRESSURE			
518			
CALCULATED 24-HOUR RATE			
OIL—BBL.			
GAS—MCF.			
1,027			
WATER—BBL.			
OIL GRAVITY-API (CORR.)			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY	
VENTED		VERNE ROCKHOLD	
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 Gilbert D. Rockhold		TITLE DRILLING SUPERINTENDENT	
DATE SEPTEMBER 28, 1964			

***(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:			38. GEOLOGIC MARKERS	
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.	
				MEAS. DEPTH TRUE VERT. DEPTH
			WASATCH KIRTLAND FRUITLAND PICTURED CLIFFS LEWIS	SURFACE 2320 3550 3761 3822