

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 Contract 147			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. DESGR. ☐ 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 87401		8. FARM OR LEASE NAME Jicarilla Contract 147			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 820' FWL & 1100' FWL At top prod. interval reported below Same At total depth Same		9. WELL NO. 5			
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT Las Alamos			
15. DATE SPUDDED 10-14-70		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA NW/4 Section 7, 8-25-N, R-5-W			
16. DATE T.D. REACHED 10-29-70		12. COUNTY OR PARISH Rio Arriba			
17. DATE COMPL. (Ready to prod.) 10-30-70 (FWA)		13. STATE New Mexico			
18. ELEVATIONS (DF, REB, RT, OR, ETC.)* GL 6704', EBN 6718'		19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD 7300'		21. PLUG, BACK T.D., MD & TVD			
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY ROTARY TOOLS			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Dry Hole		25. WAS DIRECTIONAL SURVEY MADE No			
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electrical and Gamma Ray Sonic		27. WAS WELL CORED No			
28. CASING RECORD (Report all strings set in well)					
CASING SIZE 8-5/8"	WEIGHT, LB./FT. 240	DEPTH SET (MD) 425'	HOLE SIZE 12-1/4"	CEMENTING RECORD 400 sacks (circ)	AMOUNT PULLED None
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	DEPTH SET (MD)	SIZE	DEPTH SET (MD)
30. TUBING RECORD					
31. PERFORATION RECORD (Interval, size and number)					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
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	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY		TEST DATE	
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 D. A. [Signature]		TITLE Area Engineer		DATE November 2, 1970	

*(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 38, 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 38. 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.	NAME		
				MEAS. DEPTH		
				TRUE VERT. DEPTH		
				Ojo Alamo	2320'	2360'
				Pictured Cliffs	2875'	2890'
				Chasara	3740'	3770'
				Mesa Verde	4515'	5158'
				Gallup	6220'	6608'
				Greenhorn	7008'	7055'
				Graneros Sand	7090'	7120'
				Main Dakota	7215'	7308'