

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 ☐		Canyon Largo Unit	
2. NAME OF OPERATOR		J. Gregory Merrion & Robert L. Bayless		S. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR		P.O. Box 1541 Farmington, New Mexico 87401		9. WELL NO.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 1650 FSL and 1600 FWL		10. FIELD AND POOL, OR WILDCAT	
At top prod. interval reported below		Same		Undes. Gallup Basin Dakota	
At total depth		Same		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
14. PERMIT NO.		14. PERMIT NO.		Section 3, T24N, R6W	
15. DATE SPUNDED		16. DATE T.D. REACHED		12. COUNTY OR PARISH	
August 8, 1975		September 7, 1975		Rio Arriba	
17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*		13. STATE	
September 7, 1975		6410 GR		New Mexico	
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		23. INTERMEDIATE ROTARY TOOLS	
6710		6697		ALL	
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	
For Dakota - See previous reports		No		Induction - Electric -- FDC-GR	
Gallup - 5593-97, 5471-75		27. WAS WELL CORED		28. CASING RECORD (Report all strings set in well)	
No		No		29. LINER RECORD	
29. LINER RECORD		30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number)	
SIZE		SIZE		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
TOP (MD)		DEPTH SET (MD)		DEPTH INTERVAL (MD)	
BOTTOM (MD)		SACKS CEMENT*		AMOUNT AND KIND OF MATERIAL USED	
SCREEN (MD)		SCREEN (MD)		5593-97,	
2 3/8"		6661		5471-75	
No		No		32,000 gallons of gelled diesel	
33. PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		with 76,000# sand	
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		33. PRODUCTION	
Sept. 7, 1975		Pumping		WELL STATUS (Producing or shut-in)	
DATE OF TEST		HOURS TESTED		Producing	
Sept. 8, 1975		24		GAS—MCF.	
CHOKE SIZE		PROD'N. FOR TEST PERIOD		WATER—BBL.	
2"		35		GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE		OIL GRAVITY-API (CORR.)	
CALCULATED 24-HOUR RATE		OIL—BBL.		39	
35		220 DK		35. LIST OF ATTACHMENTS	
35. LIST OF ATTACHMENTS		TEST WITNESSED BY		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
Sold - El Paso Natural Gas Company		M. Ellsaesser		SIGNED	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		TITLE		Operator	
DATE		September 22, 1975		DATE	

***(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.

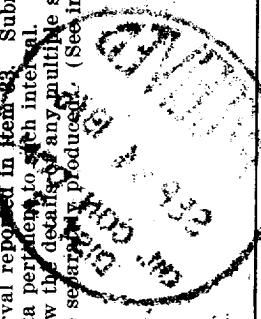
Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

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 23. 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