5 BLM, Fmn 1 Harvey UNITED STATES

l File 2 EPNG SUBMIT IN DUPLICATE.

TR 1 MW

DEPARTMENT OF THE INTERIOR

(See other instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

	GE	EOLOGICA	L SURVE	Y			NM 9	520			
WELL COM	MPLETION C	OR RECOM	PLETION	REPORT	AND	LOG	* 6. IF INDIA	N, ALLO	TTEE OR TRIBE NAME		
1a. TYPE OF WELL		GAS WELL XX		Other	ــــــــــــــــــــــــــــــــــــــ	-	7. UNIT AGI	REEMEN'	T NAME		
b. TYPE OF COMP		WELL A.A.	DRY L	Other			7				
NEW XX	WORK DEEP-	PLOG BACK	DIFF. DESVR.	Other		···	S. FARM OR	LEASE	NAME		
2. NAME OF OPERATO	or			W. Carlotte	, 10	684		Elwood P. Dowd			
	n Production	n Corp.			14	J- ≠= 8 8 8	9. WELL NO).			
3. ADDRESS OF OPER		. •	NIM 07400			SIR		ND POO	L, OR WILDCAT		
4. LOCATION OF WEL	Box 208, Far	omington,	NM 87499		Short	4. Main			- Pictured Cl		
	1190' FSL -			3. 5.00	16/12.		3 11. SEC., T.	, R., M.,	OR BLOCK AND SURVEY		
	erval reported below				1		OR ARE	٨			
	•						• Sec.	10	T24N R9W		
At total depth			14. PERMIT N		DATE IS	eren'	12. COUNTY	. 08	13. STATE		
			14. PERMIT S	0.			PARISH	_			
5. DATE SPUDDED	16. DATE T.D. REAC	CHED 17. DATE	COMPL. (Ready	to prod.) 15		-30-79	RKB, RT, GR, ETC.)*	Juan 19.	NM ELEV. CASINGHEAD		
5-30-79	6-4-79	4	-23-83			29' GL			6729' GL		
20. TOTAL DEPTH, MD 8		BACK T.D., MD & T	VD 22. IF MU	ULTIPLE COMPL MANY*		23. INTERV	ALS ROTARY TO	OLS	CABLE TOOLS		
2814'	2	2270 '	How	sing	le		TD_				
24. PRODUCING INTER			BOTTOM, NAME	(MD AND TVD)	•			2	5. WAS DIRECTIONAL SURVEY MADE		
1740-44, 1	Pictured Cli	ffs							No		
200000000000000000000000000000000000000	No offine loca et							1 27 W	AS WELL CORED		
IES, GR	ND OTHER LOGS RU	N							No		
1E3, UN		CASIN	G RECORD (R	enort all string	s set in	well)		1	110		
CASING SIZE	WEIGHT, LB./FT.			HOLE SIZE	1		TING RECORD		AMOUNT PULLED		
7"	20	69	' GL	8-3/4"	41 0	cf clas	s B 2% CaCl				
2-7/8"	6.4	2814	' GL	5-1/8"	315	cf 65-	35 w/ 12% g	iel &			
# flocele/sl	k & class B	neat w/ 4	<u># flocele</u>	<u>/sk</u>	·						
		VID BEGORE			<u> </u>		TITING PRO	2000			
29.		NER RECORD	SACKS CEMENT*	SCREEN ()		SIZE	TUBING REG		PACKER SET (MD)		
None	TOP (SID)	OTTOM (MB)	SACKS CEMENT.	- SCREEN (3	-] 1/11	1750'		FACRER SET (212)		
None				_	-	14	1730				
31. PERFORATION REC	OED (Interval, size	and number)		32.	ACII	, SHOT, F	RACTURE, CEME	NT SQU	EEZE, ETC.		
2602-2604	, 2608-2610,	, 2621-262	3,	DEPTH IN	TERVAL	(MD)	AMOUNT AND KI	IND OF	MATERIAL USED		
	, 2640-2644,			174	0-44						
	PLUGGED BACK							1, 21 gal. adafoa 1, 150 bb			
1/40-1/44	', 8 holes,	2 SPF, 2-	1/8"	200				& 122,100 SFC nitrogen.			
33.*		······································	PR	GDUCTION	2-44	1 1	lo frac <mark>or</mark> a	Cla	 		
DATE FIRST PRODUCTI		non method (FI			and typ	e of pump		L STATU	S (Producing or SI		
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N, FOR	OIL-BBL.		GAS-MCF.	WATER—B	BL.	GAS-OIL RATIO		
4-23-83	3	1/2	TEST PERIOD			75	heavy i	nist			
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED	OIL—BBL.	GAS-	-MCF.	w	ATER-BBL.		RAVITY-API (CORR.)		
2	468 SI	24-HOUR RATE			88						
34. DISPOSITION OF GA			.1		-		TEST WITN	_			
	uring test;	to be sol	d					Dug	;d()		
35. LIST OF ATTACHN							6.00		0.00-		
** St hy 36. I bereby certify	ydrocarbons/						from all araticals	FFIE	O FOR RECORD		
oo. I hereny certify	That the foregoing	ana attached ini					nom an avanable	records	•		
SIGNED		nac A Buc	TITLE _	Petroleu	ım End	<u>gineer</u>	DA1	≱ Δ\$-	2339283		
	111011	nas A. Dug	all						<u>~ 9 1303</u>		

NSTRUCTIONS

Genzral: 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 in the state laws and regulations. All attachments

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. should be listed on this form, see item 35.

or Federal office for specific instructions. Consult local State

Hem 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. 11 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 intervals, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separately produced, showing the additional interval to such intervals of any intervals of the separately produced, showing the additional pertinent to such intervals of any multiple separately supplemental records for this well should show the details of any multiple separate completion reports on this form for each interval to be separately produced. (See the Atom for items 22 and 24 above)

	17. SUMMARY OF PORSION ALL INTERVAL DEPTH INTERVAL FORMATION	Pem 33: Submit a sej
	OUS ZONES: TESTED, CUSHION TOP	parate completic
	USED, TIME TOOL OF	n report on this
	SUMMARY OF POROUS ZONES: CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDION DEPTH INTERVAL TESTED, CUSITON USED, TIME TOOL OFEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES FORMATION TOP BOTTOM DETC	Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See i
Ojo Alamo Kirtland Fruitland Pictured Cliffs Lewis Chacra	S U	N 8 1983
957' 1209' 1434' 1740' 1893' 2150'	GHOLOGIC MARKERS	SANTA FE 22 and 21 above.)
T. OEFTH		

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