

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 <u>FIVE</u>				5. LEASE DESIGNATION AND SERIAL NO. Jic. Apache Tribal Con. #152																			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other <u>24 1073</u>				6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jic. Apache																			
2. NAME OF OPERATOR Northwest Production				7. UNIT AGREEMENT NAME																			
3. ADDRESS OF OPERATOR Box 1796, El Paso, Texas				8. FARM OR LEASE NAME Jicarilla 152 W																			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1480'S, 1665'W At top prod. interval reported below At total depth				9. WELL NO. #4																			
14. PERMIT NO. DATE ISSUED				10. FIELD AND POOL, OR WILDCAT So. Blanco PC & Blanco MV																			
15. DATE SPUDDED 7/8/78 16. DATE T.D. REACHED 7/16/78 17. DATE COMPL. (Ready to prod.) 10/26/78 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6552' GL 19. ELEV. CASINGHEAD				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 5, T-26-N, R-5-W NMPM																			
20. TOTAL DEPTH, MD & TVD 5814' 21. PLUG, BACK T.D., MD & TVD 5797' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS → 10=5814'				12. COUNTY OR PARISH Rio Arriba																			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3160-3220(PC) 4838-5770(MV)				13. STATE New Mexico																			
26. TYPE ELECTRIC AND OTHER LOGS RUN IEL-GR; CDL-GR; Ind.-GR; Temp. Survey				25. WAS DIRECTIONAL SURVEY MADE No																			
28. CASING RECORD (Report all strings set in well)				27. WAS WELL CORED No																			
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)																							
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 <u>James Bradford</u>		TITLE <u>Drilling Clerk</u>		DATE <u>11/20/78</u>																			

*(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 WELL ZONES:			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			PC	3154	
			MV	4830	
			PL	5370	