

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. Contract No. 01	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
2. NAME OF OPERATOR SUTTON ENERGY CORPORATION		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 800 Farmington, New Mexico 87401		8. FARM OR LEASE NAME Jicarilla "J"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 895 ft. from South line and 910 ft. from West line. At top prod. interval reported below Same as above At total depth Same as above.		9. WELL NO. 15	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUNDED 7/7/78		16. DATE T.D. REACHED 7/10/78	
17. DATE COMPL. (Ready to prod.) 8/7/78		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6008 gr.	
19. ELEV. CASINGHEAD 6008		10. FIELD AND POOL, OR WILDCAT S. Glenon Pk. Cliffs	
20. TOTAL DEPTH, MD & TVD 3254		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 25, T-20N, R-5E, N.M.P.M.	
21. PLUG, BACK T.D., MD & TVD 3206		12. COUNTY OR PARISH San Juan	
22. IF MULTIPLE COMPL., HOW MANY*		13. STATE New Mexico	
23. INTERVALS DRILLED BY 0 to 3254		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Interval Cliffs 3094' to 3170'	
25. WAS DIRECTIONAL SURVEY MADE NO		26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electric, Density and Bond.	
27. WAS WELL CORED NO		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 9 shots size 0.42" from 3094' to 3172'		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 3005' to 2760' 300 lbs. of Acetic Acid 3094' to 3170' 37,800 lbs. of KCL water and 30,000 lbs. of 20-40 sand.	
33.* PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented	
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut in) shut in		35. LIST OF ATTACHMENTS	
DATE OF TEST 7/7/78		HOURS TESTED 3	
CHOKE SIZE 3/8"		PROD'N. FOR TEST PERIOD →	
OIL—BBL. 0		GAS—MCF. 38	
WATER—BBL. 0		GAS-OIL RATIO 0	
FLOW. TUBING PRESS. 38		CASING PRESSURE 659	
CALCULATED 24-HOUR RATE →		OIL—BBL. 0	
GAS—MCF. 705		WATER—BBL. 0	
OIL—GAL. AM. COM. 0		GAS—GAL. AM. COM. 0	
36. I hereby certify that the foregoing attached information is complete and correct as determined from all available records SIGNED Rudy D. Motto Rudy D. Motto TITLE Area Superintendent		TEST WITNESSED BY U.S. GEOLOGICAL SURVEY DURANGO, COLO. 8/9/78	

*(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: 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	TRUE VERT. DEPTH
Ojo Alamo		2770				
Fruitland	2625					
Flint Canyon	3035	3224				
Cliff						