

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. 150	
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 Supron Energy Corporation		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 808, Farmington, New Mexico 87401		8. FARM OR LEASE NAME Jicarilla "G"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 800 Ft./North; 975 Ft./West line At top prod. interval reported below Same as above At total depth Same as above		9. WELL NO. 6-M	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 2, T-26N, R-5W N.M.P.M.	
15. DATE SPUNDED 8-3-79		12. COUNTY OR PARISH Rio Arriba	
16. DATE T.D. REACHED 8-17-79		13. STATE New Mexico	
17. DATE COMPL. (Ready to prod.) 4-14-80		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6632 RKB	
19. ELEV. CASINGHEAD 6621		20. TOTAL DEPTH, MD & TVD 7786 MD & TVD	
21. PLUG, BACK T.D., MD & TVD 7771 MD & TVD		22. IF MULTIPLE COMPL., HOW MANY* 2	
23. INTERVALS DRILLED BY 0 - 7786		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7560 - 7743 Dakota MD & TVD	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Induction and Density	
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) 7560, 7561, 7562, 7563, 7564, 7667, 7669, 7670, 7671, 7672, 7673, 7674, 7707, 7708, 7710, 7711, 7712, 7714, 7715, 7716, 7739, 7740, 7741, 7742, 7743. Total of 25 0.42" holes.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 7560 - 7743 AMOUNT AND KIND OF MATERIAL USED 36,000 lb. 20-40 sand, 48,600 gal. 1% KCL water & 1500 gal of 15% HCL	
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		GAS-OIL RATIO	
DATE OF TEST 4-7-80		HOURS TESTED 3	
CHOKE SIZE 3/4"		PROD'N. FOR TEST PERIOD 981	
FLOW. TUBING PRESS. 73		CASING PRESSURE ---	
CALCULATED 24-HOUR RATE ---		OIL—BBL. ---	
GAS—MCF. ---		WATER—BBL. ---	
GRAVITY-API (CORR.)		35. LIST OF ATTACHMENTS	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		37. SIGNED Kenneth E. Roddy Kenneth E. Roddy	
TITLE Production Superintendent		DATE April 17, 1980	

*(See Instructions and Spaces for Additional Data on Reverse Side)

NMOCC

FARMINGTON DISTRICT
BY **McL Kuchera**

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:			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
				Base Ojo Alamo	2950	
				Pictured Cliffs	3274	
				Cliff House	4968	
				Menefee	5112	
				Point Lookout	5500	
				Gallup	7052	
				Base Greenhorn	7508	
				Dakota	7530	

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 _____
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

2. NAME OF OPERATOR

Supron Energy Corporation

3. ADDRESS OF OPERATOR

P.O. Box 808, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface 800 Ft./North; 975 Ft./West line

At top prod. interval reported below Same as above

At total depth Same as above

14. PERMIT NO.

DATE ISSUED

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

5. LEASE DESIGNATION AND SERIAL NO.

Contract No. 150

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla "G"

9. WELL NO.

6-M

10. FIELD AND POOL, OR WILDCAT

Blanco Mesaverde

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 2, T-26N, R-5W
N.M.P.M.

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

15. DATE SPUEDD 8-3-79 16. DATE T.D. REACHED 8-7-79 17. DATE COMPL. (Ready to prod.) 4-14-80 18. ELEVATIONS (DF, RKB, BT, GR, ETC.)* 6632 RKB 19. ELEV. CASINGHEAD 6621

20. TOTAL DEPTH, MD & TVD 7786 MD & TVD 21. PLUG, BACK T.D., MD & TVD 7771 MD & TVD 22. IF MULTIPLE COMPL., HOW MANY* 2 23. INTERVALS DRILLED BY 0 - 7786 24. ROTARY TOOLS CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

5505 - 5689 Point Lookout MD & TVD

4968 - 5096 Cliff House MD & TVD

26. TYPE ELECTRIC AND OTHER LOGS RUN

Induction and Density

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10-3/4"	32.75	293	13-3/4"	250 Sx.	
7-5/8"	26.40	3600	9-7/8"	200 Sx.	
5-1/2"	15.50	3496 - 7785	6-3/4"	500 Sx.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
5-1/2", 15.50	3496	7785	500		2-1/16" I	5547	7513

31. PERFORATION RECORD (Interval, size and number)

5505, 5507, 5510, 5513, 5515, 5520, 5524, 5527, 5536, 5539, 5541, 5545, 5548, 5558, 5560, 5563, 5580, 5582, 5584, 5586, 5589, 5593, 5597, 5602, 5638, 5640, 5641, 5687, 5689. Total of 29 0.42" holes.
4968, 4971, 4974, 4979, 4982, 4985, 4988, 5000, 5003, 5006, 5009, 5022, 5028, 5033, 5036, 5039, 5042, 5046, 5059, 5066, 5069, 5077, 5087, 5092, 5096. (25 0.42" holes)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5505 - 5689	88,000# 20-40 sd, 105,000 gal 1% KCL water, 1500 gal 15% HCL.
4968 - 5096	75,000# 20-40 sd, 90,000 gal 1% KCL water.

33. 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	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS/OIL RATIO
4-14-80	3	3/4"	→		178		
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	REL. GRAVITY API (CORR.)	
106	655	→		1420			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented

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

Kenneth E. Roddy

TITLE Production Superintendent

DATE 4-17-80

*(See Instructions and Spaces for Additional Data on Reverse Side)

NMOCC

FARMINGTON DISTRICT
BY M. L. Kuchera

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:				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Base Ojo Alamo	2950	
				Pictured Cliffs	3274	
				Cliff House	4968	
				Menefee	5112	
				Point Lookout	5500	