

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLIC.

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. Jicarilla Cont. 119																																					
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ REEP- LN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache																																					
2. NAME OF OPERATOR CONSOLIDATED OIL & GAS, INC.		7. UNIT AGREEMENT NAME																																					
3. ADDRESS OF OPERATOR P.O. BOX 2038, FARMINGTON, NEW MEXICO 87401		8. FARM OR LEASE NAME NORTHWEST FEDERAL																																					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1550 FSL & 950 FSL At top prod. interval reported below As above. At total depth As above.		9. WELL NO. 3-E																																					
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT WILDHORSE GALLUP																																					
15. DATE SHELDED 10-18-80		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA SEC. 6 T26N R4W																																					
16. DATE S.D. REACHED 10-29-80		12. COUNTY OR PARISH RIO ARRIBA																																					
17. DATE COMPL. (Ready to prod.) 2-15-81		13. STATE NEW MEXICO																																					
18. ELEVATIONS (EF, RKB, RT, GR, ETC.)* 7122 RKB		19. ELEV. CASINGHEAD 7110'																																					
20. TOTAL DEPTH, MD & TVD 8300'		21. PLUG BACK T.D., MD & TVD 8212'																																					
22. IF MULTIPLE COMPL., HOW MANY* 2		23. INTERVALS DRILLED BY ROTARY TOOLS X CABLE TOOLS																																					
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* GALLUP 7196' - 7552'		25. WAS DIRECTIONAL SURVEY MADE																																					
26. TYPE ELECTRIC AND OTHER LOGS RUN GR - CBL - CLL - CNL - FDC - IES		27. WAS WELL CORED NO																																					
28. CASING RECORD (Report all strings set in well) <table border="1"><thead><tr><th>CASING SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>BOLE SIZE</th><th>AMOUNT PULLED</th></tr></thead><tbody><tr><td>10 3/4"</td><td>32.75</td><td>324'</td><td>14 3/4"</td><td>300 sks</td></tr><tr><td>7 5/8"</td><td>26.4</td><td>4030'</td><td>9 7/8"</td><td>275 sks</td></tr><tr><td>5 1/2"</td><td>15.5</td><td>8262'</td><td>6 1/4"</td><td>375 sks</td></tr></tbody></table>				CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	BOLE SIZE	AMOUNT PULLED	10 3/4"	32.75	324'	14 3/4"	300 sks	7 5/8"	26.4	4030'	9 7/8"	275 sks	5 1/2"	15.5	8262'	6 1/4"	375 sks																
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) VENT																																							
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

TITLE

ASSISTANT PRODUCTION SUPT.

DATE

2-24-81

FARMINGTON DISTRICT

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

NMOCC

ACCEPTED FOR RECORD

APR 6 1981

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 report 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. An attachment 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 well completion details of any interval.

Item 29: "Seals (cement)": Attached supplemental records for this well should show details of any interval.

Item 33: Submit a separate completion report on this form for each interval to be produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROSITY ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORRELATE INTERVALS; AND ALL DUAL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	GEOLOGIC MARKERS	
					MEAN. DEPTH	TRUE VERT. DEPTH
Gallup	6982'	-	Ss, Dk gry sh w/ ss lenses, calc at base.	Ojo Alamo	Not logged	
				PC	"	
				Cliff House	5435'	same
				Pt Lookout	5974'	same
				Gallup	6982'	same
				Packer	7650'	same
				ID	8300'	same