

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE*

(See other instructions 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

EL PASO NATURAL GAS CO.

3. ADDRESS OF OPERATOR

BOX 289, FARMINGTON, NEW MEXICO

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

At surface 850'N, 1845'E

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

13. STATE

Rio Arriba

New Mexico

15. DATE SPURRED

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (DF, R&B, RT, GR, ETC.)*

19. ELEV. CASINGHEAD

11/7/78

11/18/78

12/18/78

6616' GR

20. TOTAL DEPTH, MD & TVD

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

7808'

7791'

0-7808'

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

7522-7750 (DK)

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Ind.-GR; CDI-GR; Temp. Survey

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
9 5/8"	36#	298'	13 3/4"	295 cf.	
7"	20#	3601'	8 3/4"	263 cf.	
4 1/2"	10.5 and 11.6#	7808'	6 1/4"	654 cf.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1 1/2"	7721'	

31. PERFORATION RECORD (Interval, size and number)

7522, 7532, 7542, 7553, 7581, 7625, 7649, 7659, 7677, 7699, 7705, 7725, 7743, 7750 with 1 SPZ.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
7522-7750	150,000# 20/40 sand; 50,000# 10/20 sand and 122,000 gal. treated wtr.

PRODUCTION

DATE FIRST PRODUCTION _____ PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) _____ WELL STATUS (Producing or shut-in) _____

After Frac Gauge - Too weak to gauge

SI

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
12/18/78							

FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
1973	2472					

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

D. G. Busco

TITLE

Drilling Clerk

DATE

1/2/79

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

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completed report and log on all types of lands and leases to either a Federal agency or a State agency, (e.g., Bureau of Land Management, 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, and procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal office.

[illegible]

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with item 24 show the producing formation and pressure tests, and directional surveying information and in any attachments should be listed on this form, see Item 35.

[illegible]

Item 18: Indicate which elevation is used for separate production from above interval.

Items 22 and 24: If this well is completed for only the interval reported in item 33, submit a log showing additional data pertinent to such interval.

Items 22 and 24: If this well is completed for more than one interval, show details of each interval separately produced. (See instruction for items 22 and 24 above.)

interval, or intervals, objects), and, if necessary, show the details of any maps, photos, or other objects used. (See instruction for Items 22 and 23 above.)

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any interval to be separately produced.

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Item 30: Submit a separate completion report on this form for each interval to be separately produced.

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37. SUMMARY OF POROUS ZONES SHOW ALL IMPORTANT ZONES DEPTH INTERVAL TESTED, CUE		38. GEOLOGIC MARKERS	
FORMATION	TOP	NAME	MEAS. DEPTH
POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING ON USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		TRUE VERT. DEPTH	
DESCRIPTION, CONTENTS, ETC.			
		MV	4889
		PL	5467
		Gallup	6490
		GH	7417
		Graneros	7477
		DK	7612

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