

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. SF 078566-A	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
2. NAME OF OPERATOR El Paso Natural Gas Company				7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico - 87401				8. FARM OR LEASE NAME Howell	
4. LOCATION OF WELL (Report location clearly and in accordance with any state requirements)* At surface 1700'N, 1690'W At top prod. interval reported below At total depth				9. WELL NO. 7	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT OR AREA So. Blanco P. C.	
15. DATE SPUDDED 9-20-68				11. SEC., T., R., M., OR BLOCK AND SURVEY Sec. 26, T-28-N, R-8-W N.M.P.M.	
16. DATE T.D. REACHED 9-24-68				12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 10-9-68				13. STATE New Mexico	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5848' GL				19. ELEV. CASINGHEAD _____	
20. TOTAL DEPTH, MD & TVD 2490'		21. PLUG, BACK T.D., MD & TVD 2480'		22. IF MULTIPLE COMPL., HOW MANY* _____	
23. INTERVALS DRILLED BY 0-2490'				24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2326 - 2356' (Pictured Cliffs)	
25. WAS DIRECTIONAL SURVEY MADE No				26. TYPE ELECTRIC AND OTHER LOGS RUN I-ES, FDC/GR, Temp. Survey	
27. WAS WELL CORED No				28. CASING RECORD (Report all strings set in well)	
CASING SIZE 8 5/8" 2 7/8"		WEIGHT, LB./FT. 24# 6.4#		DEPTH SET (MD) 107' 2490'	
HOLE SIZE 12 1/4" 6 3/4"		CEMENTING RECORD 95 Sks. 160 Sks.		AMOUNT PULLED OCT 2 1968	
29. LINER RECORD				30. TUBING RECORD	
SIZE _____ _____ _____		TOP (MD) _____ _____ _____		DEPTH SET (MD) _____ _____ _____	
BOTTOM (MD) _____ _____ _____		SACKS CEMENT* _____ _____ _____		PACKER SET (MD) _____ _____ _____	
31. PERFORATION RECORD (Interval, size and number) 2326-40', 2350-56' w/24 SPZ				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 2326-2356 AMOUNT AND KIND OF MATERIAL USED 35,700 gal. water, 35,000# sand	
33.* PRODUCTION					
DATE FIRST PRODUCTION _____		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing			WELL STATUS (Producing or Shut-in) Shut In
DATE OF TEST 10-9-68		HOURS TESTED 3		CHOKE SIZE 3/4"	
PROD'N. FOR TEST PERIOD _____ _____ _____		OIL—BBL. _____ _____ _____		GAS—MCF. _____ _____ _____	
WATER—BBL. _____ _____ _____		GAS-OIL RATIO _____ _____ _____		OIL GRAVITY-API (CORR.) _____ _____ _____	
FLOW. TUBING PRESS. SI 1061		CASING PRESSURE 2057 MCF/D - A.O.F.		TEST WITNESSED BY D. R. Roberts	
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 Carl E. Matthews TITLE Petroleum Engineer DATE 10-17-68					

*(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.), formations, 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 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	TOP	TRUE VERT. DEPTH
Picture 2315	2315		