

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.

5. LEASE DESIGNATION AND SERIAL NO.

SP 078490

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT OR AREA

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

Sec. 34, T 27N, R 6W

12. COUNTY OR PARISH
San Juan

13. STATE
N. Mex.

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. LESVR. Other _____

2. NAME OF OPERATOR
Jerome P. McHugh

3. ADDRESS OF OPERATOR
Box 234, Farmington, N. M. 87401

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

At surface 990' FHL 800' FEL

At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED

U. S. GEOLOGICAL SURVEY

JUL 8 1970

RECEIVED

15. DATE SPUNDED 5-1-70 16. DATE T.D. REACHED 5-25-70 17. DATE COMPL. (Ready to prod.) 6-15-70 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6241' GR 19. ELEV. CASINGHEAD -

20. TOTAL DEPTH, MD & TVD 2385' 21. PLUG, BACK T.D., MD & TVD 2350' 22. IF MULTIPLE COMPL., HOW MANY* Single 23. INTERVALS DRILLED BY → 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Pictured Cliffs 2310' - 2328' 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray, Density and Electrical 27. WAS LOG 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
8 5/8"	24#	93'	12 1/4"	85 sz	-
6 1/2"	9.5#	2385'	6 3/4"	125 sz	-

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1 1/4"	2304	-

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
INTERVAL	SIZE	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2310 - 18'		2310 - 2328	15,000# 20 - 40 sd.
2320 - 28'			15,000# 10 - 20 sd.
			981 bbls. water

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	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
7-2-70	3	5/8"	→		244		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.		
17	494	→		249			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY JUL 9 1970

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 Engineer DATE 7-7-70



*(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 the 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, as in 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 23, 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: "Sack 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		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
FORMATION		TOP	BOTTOM		NAME	MEAS. DEPTH	TRUE VERT. DEPTH
					<u>Los Tons</u>	1552'	
					Ojo Alamo	1636'	
					Kiertland	2060'	
					Fruitland	2305'	
					Pictured Cliffs	2354'	
					Lewis	2385'	
					T. D.		