

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. RESER. ☐	Other ☐
2. NAME OF OPERATOR		El Paso Natural Gas Company				MAY 8 1973	
3. ADDRESS OF OPERATOR		PO Box 990, Farmington, NM				U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 1540'S, 1550'E 1500					
At top prod. interval reported below							
At total depth							
14. PERMIT NO.		DATE ISSUED					
5. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, REB, RT, GR, ETC.)*	
12-21-72		12-28-72		4-30-73		5733'GL	
20. TOTAL DEPTH, MD & TVD		21. PLUG. BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY	
2259'		2248'				0-2259'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		2160-2220'(Pictured Cliffs)				25. WAS DIRECTIONAL SURVEY MADE	
						no	
26. TYPE ELECTRIC AND OTHER LOGS RUN		CDL-GR; IEL; Temp. Survey				27. WAS WELL CORED	
						no	
28. CASINO RECORD (Report all strings set in well)		Casing Record				CEMENTING RECORD	
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 5/8"		24.0#		140'		12 1/4"	
2 7/8"		6.4#		2259'		7 7/8" & 6 3/4"	
						107 cu. ft.	
						483 cu. ft.	
29. LINER RECORD		Liner Record				30. TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		SIZE	
						DEPTH SET (MD)	
						tubingless	
31. PERFORATION RECORD (Interval, size and number)		2160-70', 2180-90' and 2210-20' with 30 shots per zone.				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
						DEPTH INTERVAL (MD)	
						AMOUNT AND KIND OF MATERIAL USED	
						2160-2220'	
						30,000#sand, 30,800 gal. water	
33.* PRODUCTION		DATE FIRST PRODUCTION				PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
						flowing	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
4-30-73		3		3/4"		OIL—BBL.	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		GAS—MCF.	
tubingless		SI 835				WATER—BBL.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						OIL GRAVITY-API (CORR.)	
						826 AOF	
35. LIST OF ATTACHMENTS						TEST WITNESSED BY	
						B. Broughton	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED <u>A. J. Broughton</u>				TITLE <u>Drilling Clerk</u>	
						DATE <u>5-7-73</u>	

*(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 both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number 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 and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed before the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric log and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. 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. Complete 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 other 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 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, adequate 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.

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	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			NAME	MEAS. DEPTH
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	
			Pictured Cliffs	2158'