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UNIT APPROVED,
Budget Bureau No. 42 H365.5
5. LEASE DESIGNATION AND SERIAL NO.
SF 078490-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
UNIT AGREEMENT

NAME
K. FARM OR LEASE NAME
Hardie E
WELL NO.
2A

12. COUNTY OR PARISH
San Juan

13. STATE
New Mexico

14. PLEV. CASINGHEAD

27. WAS WELL CORRED
No

PACKER SET (MD)

l. wtr.

El Paso Natural Gas Company
P. O. Box 990, Farmington, N.M.
LOCATION OF WELL (Report location)
At surface 1050'

16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. PERMIT NO.	DATE ISSUED
9-22-76	11-3-76		
21. PLUG, BACK T.D., MD & TVD	22. INTERVAL (S), OF THIS CONE		
5424'	4376		

Casing Record					
ST.	LB./FT.	CASING RECORD (Report all strings set in well)	HOLE SIZE		
36#		DEPTH SET (MD)			
20#		237'	13 3/4"		
		3150'	8 3/4"		
(MD)	LINER				

5046	4875	4532	4457	4548	4978	4991	5064	5166	5177	5381
5104	5117	5052	5058	5064	5166	5177	5381	5396	5401	5406
5299	5317	5328	5347	5381	5401	5406	5411	5416	5421	5426
zone.										
DUCTION METH.										

WELL STATUS (Producing or Shut-in)
Shut-in
RECEIVED
GAS-OIL RATIO
OIL GRAVITY
WATER-BBL.
WATER-REL.
GAS-MCF.
GAS-MCF.
GAS-MCF.
Oil-Dbl.
Oil-Dbl.
Oil-Dbl.
Attached Information

DATE November 10, 1976



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 prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electrical 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. Consult your 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: 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	TO MEAS. DEPTH
				MV	4446
				PL	5040