

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 <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR Merrion & Bayless						5. LEASE DESIGNATION AND SERIAL NO. NM 33047	
3. ADDRESS OF OPERATOR P.O. Box 507, Farmington, NM 87401						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 790 FSL and 1450 FEL At top prod. interval reported below same At total depth same						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED 5-18-78						16. DATE T.D. REACHED 5-20-78	
17. DATE COMPL. (Ready to prod.) 5-25-78						18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5998' GL	
20. TOTAL DEPTH, MD & TVD 1310 ft.						21. PLUG, BACK T.D., MD & TVD 1275 ft.	
22. IF MULTIPLE COMPL., HOW MANY*						23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1197' - Pictured Cliffs						25. WAS DIRECTIONAL SURVEY MADE no	
26. TYPE ELECTRIC AND OTHER LOGS RUN IES Induction and Compensated Density						27. WAS WELL CORED	
28. CASING RECORD (Report all strings set in well)							
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
7"		23		44'		9-3/4"	
2-7/8"		6.4		1298'		5"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
31. PERFORATION RECORD (Interval, size and number)							
1198-1202 - .420" - 2 PF							
1207-1229 - .420" - 2 PF							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
1198-1229				150 gal. 15% HCL			
33. PRODUCTION							
DATE FIRST PRODUCTION 5-25-78		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Shut in	
DATE OF TEST 5-25-78		HOURS TESTED .5		CHOKE SIZE 1-1/4"		PROD'N. FOR TEST PERIOD OIL—BBL. 925	
FLOW. TUBING PRESS. 14 PSIG		CASING PRESSURE 14 PSIG		CALCULATED 24-HOUR RATE OIL—BBL. 925		GAS—MCF. 925	
						WATER—BBL.	
						OIL GRAVITY-API (CORR.)	
						TEST WITNESSED BY Steven S. Dunn	
						OIL CON. COM. DIST. 3	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented							
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 <u>Steven S. Dunn</u>		TITLE <u>Engineer</u>		DATE <u>05-26-78</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 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.) forms, production 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, 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 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: "Stocks 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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Ojo Alamo	Surface	140 ft.	Water
Pic. Cliffs	1197 ft.	--	Natural Gas, Salt Water

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Kirtland	142 ft.	
Fruitland	859 ft.	
Pic. Cliffs	1197 ft.	