

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. NM 03099	
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 PO Box 990, Farmington, NM 87401				8. FARM OR LEASE NAME Grambling	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1713'S, 511'E At top prod. interval reported below 1650/N, 990/E At total depth				9. WELL NO. 1 (OWWO)	
14. PERMIT NO.				DATE ISSUED	
15. DATE SPUDDED W/O 9-24-71				16. DATE T.D. REACHED W/O 12-16-71	
17. DATE COMPL. (Ready to prod.) W/O 9-30-71				18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5643'GL	
19. ELEV. CASINGHEAD				20. TOTAL DEPTH, MD & TVD 4732	
21. PLUG, BACK T.D., MD & TVD 4716				22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS				ROTARY TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3734-4672' (Mesa Verde)				25. WAS DIRECTIONAL SURVEY MADE no	
26. TYPE ELECTRIC AND OTHER LOGS RUN C-DLC-GR, IL, Temp. Survey				27. WAS WELL CORED no	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
9 5/8"		36#		522'	
7"		20#		4315'	
4 1/2"		10.5#		4732'	
HOLE SIZE		AMOUNT PULLED		AMOUNT PULLED	
165 sks.		450 sks.		125 sks.	
29. LINER RECORD					
SIZE		TOP (MD)		BOTTOM (MD)	
m		4661'		PACKER SET (MD)	
30. TUBING RECORD					
SIZE		DEPTH SET (MD)		PACKER SET (MD)	
2 3/8"		4661'		PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number) 3734-40', 3788-96', 3806-14' with 24 shots per zone. 4316-26', 4344-52', 4362-66', 4384-92', 4464-72', 4524-32', 4582-90', 4664-72' with 16 shots per zone.					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
3734-3814'		32,000#sand, 33,180 gal. water			
4316-4672'		72,000#sand, 73,080 gal. 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 12-16-71		HOURS TESTED 3		CHOKE SIZE 3/4"	
FLOW. TUBING PRESS. SI 189		CASING PRESSURE SI 696		CALCULATED 24-HOUR RATE 2502 MCF/D-AOF	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY Dannie Ro. Roberts			
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 Original Signed P. H. Roberts		TITLE Petroleum Engineer		DATE December 22, 1971	

*(See Instructions and Spaces for Additional Data on Reverse Side)

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.), 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, see item 33.

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, top(s), bottom(s) and name(s) to be separately produced, showing the additional data pertinent to such interval.

Item 23: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 23 above.)

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