

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 _____		
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☒	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR El Paso Natural Gas Company							
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 790'N, 1450'E At top prod. interval reported below At total depth							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 3-29-53				16. DATE T.D. REACHED 4-17-53		17. DATE COMPL. (Ready to prod.) 6-26-64 (workover)	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5892' OL, 5892' DF				19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD 5118		21. PLUG, BACK T.D., MD & TVD 5068		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-5118	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4432-5036 (Perfs.) Mesa Verde						25. WAS DIRECTIONAL SURVEY MADE	
26. TYPE ELECTRIC AND OTHER LOGS RUN Schlumberger GRI, McCullough Casing Insp., Temp. Survey						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
9 5/8"		25.4#		175'		12 1/4"	
7"		23#		4315'		8 3/4"	
5 1/2"		15.5#		4202-5088'		6 1/4"	
5 1/2"		15.5#		4200'		7"	
29. LINER RECORD		SIZE		TOP (MD)		BOTTOM (MD)	
5 1/2"		4202		5088		200	
30. TUBING RECORD		SIZE		DEPTH SET (MD)		CUMULATIVE DEPTH SET (MD)	
2 3/8"		5034					
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
4432-40, 4446-60, 4504-24 w/DJ & 2 SPT				DEPTH INTERVAL (MD)			
4764-76, 4802-12, 4908-20, 4938-50,				AMOUNT AND KIND OF MATERIAL USED			
4958-66, 5003-14, 5021-36 w/DJ & 2 SPT				4432-4524 40,000 gal. water; 40,000# 40/60 S			
				4764-5036 60,000 gal wtr; 60,000# 20/40 sand			
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
7-22-64 after workover		Flowing				Producing	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
7-9-64		3		3/4"		OIL—BBL. GAS—MCF. WATER—BBL. GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL. GAS—MCF. WATER—BBL. GRAVITY-API (CORR.)	
SIP 637		SIP 637		10,461		TEST WITNESSED BY	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		J. B. Goodwin					
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		OR'G'NAL SIGNED		F. S. OBERLY		TITLE	
				Petroleum Engineer		DATE	
						7-23-64	

*(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 38, 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 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: "Sacks 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			38. GEOLOGIC MARKERS				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUS. VERT. DEPTH
Ojo Alamo	0	1640					
Kirtland	1640	1728					
Fruitland	1728	2353					
Pictured Cliffs	2353	2672					
Lewis	2672	2762					
Cliff House	2762	4362					
Hemphill	4362	4535					
Point Lookout	4535	4910					
Marathon	4910	5014					
	5014	5118					