

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 _____		7. UNIT AGREEMENT NAME _____			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. DESVR. ☐ Other _____		8. FARM OR LEASE NAME _____			
2. NAME OF OPERATOR Tenneco Oil Company		9. WELL NO. #1			
3. ADDRESS OF OPERATOR 1200 Lincoln Tower Building, Denver, Colorado 80203		10. FIELD AND POOL, OR WILDCAT Blanco Pictured Cliffs			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' FSL and 1650' FWL At top prod. interval reported below Unit K same At total depth same		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 28-T30N-R9W			
14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH San Juan			
15. DATE SPUNDED 1/11/69		13. STATE New Mexico			
16. DATE T.D. REACHED 1/21/69		19. ELEV. CASINGHEAD 5906 GL			
17. DATE COMPL. (Ready to prod.) 3/19/69		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5918KB			
20. TOTAL DEPTH, MD & TVD 2703'		21. PLUG, BACK T.D., MD & TVD 2650'			
22. IF MULTIPLE COMPL., HOW MANY* --		23. INTERVALS DRILLED BY --			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2587-2599 Blanco Pictured Cliffs		25. WAS DIRECTIONAL SURVEY MADE Yes			
26. TYPE ELECTRIC AND OTHER LOGS RUN TEL, AL, GR		27. WAS WELL CORED Yes			
28. CASING RECORD (Report all strings set in well)					
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
8 5/8		24#		110.12'	
3 1/2		7.7 #		2681'	
29. LINER RECORD					
SIZE		TOP (MD)		BOTTOM (MD)	
30. TUBING RECORD					
SIZE		DEPTH SET (MD)		PACKER SET (MD)	
None					
31. PERFORATION RECORD (Interval, size and number)					
2587-2599' 2 shots/ft.					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
2587-2599		250 gal. 15% HCL			
		34,272 gal. water			
		40,000 sand			
33. PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in)
2/28/69		Flowing			SI
DATE OF TEST		HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.
3/19/69		24	3/4"	→	0
FLOW. TUBING PRESS.		CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.
-		233	→	0	3491
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
Sold					
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 Don A. Cook		TITLE Production Clerk		DATE 4/29/69	

*** (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, 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 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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
XXXXXXXXXX	1483	1483	
XXXXXXXXXX	2280	2280	
XXXXXXXXXX	2580	2580	
Farmington	1483	2280	
Fruitland	2280	2580	
Pic. Cliffs	2580	TD	

38. GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Farmington	1483	
Fruitland	2280	
Pic. Cliffs	2580	

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
UNITED STATES

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