

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved, Budget Bureau No. 42-10355.5.

5. LEASE DESIGNATION AND SERIAL NO.

SF 080776

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Florance "F"

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Blanco Pictured Cliffs

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 25, T-30-N, R-10-W NMPM

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL [] GAS WELL [X] DRY [] Other []

1b. TYPE OF COMPLETION: NEW WELL [X] WORK OVER [] DEEP-EN [] PLUG BACK [] DIFF. RESVR. [] Other []

2. NAME OF OPERATOR: El Paso Natural Gas Company

3. ADDRESS OF OPERATOR: PO Box 990, Farmington, NM 87401

4. LOCATION OF WELL: At surface 990'S, 1668'E; At top prod. interval reported below; At total depth

14. PERMIT NO. DATE ISSUED APR 10 1972

15. DATE SPUNDED 3-8-72; 16. DATE T.D. REACHED 3-10-72; 17. DATE COMPL. (Ready to prod.) 4-3-72; 18. ELEVATIONS (DF, RKB, ET, GR, ETC.) 5958'GL; 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 2640'; 21. PLUG, BACK T.D., MD & TVD 2630'; 22. IF MULTIPLE COMPL., HOW MANY?; 23. INTERVALS DRILLED BY; ROTARY TOOLS 0-2640; CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2540-80' (Pictured Cliffs); 25. WAS DIRECTIONAL SURVEY MADE no

26. TYPE ELECTRIC AND OTHER LOGS RUN IES-FDC-GR, Temp Survey; 27. WAS WELL SORED

Table with 5 columns: CASING SIZE, WEIGHT, LB./FT., DEPTH SET (MD), HOLE SIZE, CEMENTING RECORD. Includes data for 8 5/8" and 2 7/8" casing sizes.

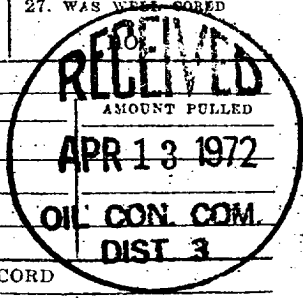


Table with 2 main sections: 29. LINER RECORD (SIZE, TOP (MD), BOTTOM (MD), SACKS CEMENT*, SCREEN (MD)) and 30. TUBING RECORD (SIZE, DEPTH SET (MD), PACKER SET (MD)).

31. PERFORATION RECORD (Interval, size and number) 2540-60', 2570-80' with 30 shots per zone. 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. Table with DEPTH INTERVAL (MD) and AMOUNT AND KIND OF MATERIAL USED.

33.* PRODUCTION Table with columns: DATE FIRST PRODUCTION, PRODUCTION METHOD (flowing), WELL STATUS (shut-in), DATE OF TEST, HOURS TESTED, CHOKER SIZE, PROD'N. FOR TEST PERIOD, OIL-BBL., GAS-MCF., WATER-BBL., GAS-OIL RATIO.

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY D. R. 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 F. H. WOOD TITLE Petroleum Engineer DATE April 10, 1972

*(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.), 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 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, COLLARED, ETC.

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliffs	2540'	