

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.

5. LEASE DESIGNATION AND SERIAL NO.

SF 076337

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

E. D. Heath "B"

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

Blanco Pictured Cliffs

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREASE 1/4 SW 1/4 Section 31,
T-30-N, R-9-W12. COUNTY OR
PARISH

San Juan

13. STATE

New Mexico

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

AMOCO PRODUCTION COMPANY

3. ADDRESS OF OPERATOR

501 Airport Drive, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface 835' FSL & 1110' FSL

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED 6-5-72 16. DATE T.D. REACHED 6-14-72 17. DATE COMPL. (Ready to prod.) 7-14-72 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5734' Gr. 19. ELEV. CASINGHEAD 5735'

20. TOTAL DEPTH, MD & TVD 2416' 21. PLUG, BACK T.D., MD & TVD 2370' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY ROTARY TOOLS 2416' CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

2301-2340' Pictured Cliffs

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray-Montrom

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTED RECORD	AMOUNT PULLED
8-5/8"	23#	228'	12-1/4"	236 cu. ft.	None
4-1/2"	9.5#	2409'	7-7/8"	1112 cu. ft.	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1-1/4"	2240'	

31. PREPARATION RECORD (Interval, size and number)

2301-2308' & 2314-2340' x 1 SPF

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2301-2340'	Gas Frac with 17,000 lb. 20-40 oz & 18,300 gal. CO ₂ LPG, Cal Alcohol in 1:3:3 ratio

33.* PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in) SI

DATE OF TEST 7-14-72 HOURS TESTED 3 hr. CHOKE SIZE .750 PROD'N. FOR TEST PERIOD OIL—BBL. GAS—MCF. 158 WATER—BBL. GAS-OIL RATIO

FLOW. TUBING PRESS. 94 psig CASING PRESSURE 375 psig CALCULATED 24-HOUR RATE OIL—BBL. GAS—MCF. 1259 WATER—BBL. OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

To be connected to El Paso Natural Gas Co.

TEST WITNESSED BY

Beryl Baker

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 J. ARNOLD SNELL

TITLE Area Engineer

DATE July 24, 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 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) of the interval zone 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:				38. GEOLOGIC MARKERS			
FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE WEST DEPTH
					Fruitland Pictured Cliffs	2080' 2280'	