

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved,
Budget Bureau No. 42-0355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. NAME, DESIGNATION AND SERIAL NO. SP 078128	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ PLUG BACK ☐ DEEP. RESVR. ☐ Other _____		6. H. LIPPS, ALLOTTE, 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. NAME OF LEASE NAME Turner	
4. LOCATION OF WELL (Report to this clearly and in accordance with any State requirements)* At surface 1740'N, 950'W At top prod. interval reported below At total depth		9. WELL NO. 6	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Blanco Pictured Cliffs Ext.	
DATE ISSUED		11. SECTION, R., M., QUAD AND T. AND R. OR AVE. Sec. 13, T-30-N, R-10-W NMPM	
12. COUNTY OR TERRITORY San Juan		13. STATE New Mexico	
15. DATE SPUDDED 10-22-72	16. DATE FIRST REACHED 10-27-72	17. DATE COMPL. (Ready to prod.) 6-25-73	18. ELEVATIONS (DF, ESB, E, GR, etc.) 6538'GL
19. ELEV. CASING HEAD	20. TOTAL DEPTH, MD & TVD 3319'	21. DEPTH, ROCK T.D., MD & TVD 3308'	22. IF MULTIPLE COMPL., HOW MANY*
23. INTERVAL DRILLED BY	24. PRODUCING INTERVAL(S), OF T.D. COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* 3180-3238'(Pictured Cliffs)	25. TOTAL GALS	26. CABLE TOOLS 0-3319'
27. WAS WFLG. COMPL.	28. WFLG. SURVEY NO.	29. TYPE ELECTRIC AND OTHER DEVICES HBL; CDL-GR; Temp. Survey	
25. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB/FT	DEPTH SET (MD)	BORE SIZE
8 5/8"	24.6	144'	12 1/4"
2 7/8"	6.4	3319'	6 3/4"
26. CEMENTING RECORD			
CASING SIZE	WEIGHT, LB/FT	DEPTH SET (MD)	BORE SIZE
8 5/8"	24.6	144'	12 1/4"
2 7/8"	6.4	3319'	6 3/4"
27. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
28. PERFORATION RECORD (Indicate zone and number)			
3180-96', 3208-18' and 3228-38' with 30 shots per zone.			
29. ACID, SPOT, FRACTURE, OR FLUID SQUEEZING, ETC.			
DEPT. INTERVAL (MD)			
3180-3238'			
AMOUNT AND KIND OF MATERIAL USED 32,000 lbs. acid; 32,000 gal. water			
30. PRODUCTION			
DATE FIRST PRODUCTION			
PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump) flowing			
DATE OF TEST			
6-25-73			
HOURS TESTED			
3			
CHOKE SIZE			
3/4"			
PERIOD FOR TEST PERIOD			
OIL--BBL. GAS--MCF.			
OIL--BBL. GAS--MCF.			
WATER--BBL. OIL GRAVITY API (COIL)			
1957 AOF			
31. DISPOSITION OF GAS (sell, use for fuel, vented, etc.)			
TEST WITNESSED BY Carl Rhames			
32. LIST OF ATTACHMENTS			
33. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED _____ TITLE Drilling Clerk			
July 16 1973			

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 26, 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.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TOP
				Pictured Cliffs	3180'	TRUE VERT. DEPTH