

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other In-
structions on
reverse side)

Form approved
Budget Bureau No. 43-R355.5

1. TITLE, DESIGNATION AND SERIAL NO.

NM 03195

2. FUND, AGENCY OR FIELD NAME

3. UNIT OR PROJECT NAME

4. FIELD OR LEASE NAME

Summary 11

5. WELL NO.

5

6. WELL AND LOG NO.

Blanco Pictured Cliff Expt.
H. 2000' (M. 0000' to 2000' depth)
C. 1000'

Sec. 11, T-30-N, R-10-W
NMP

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1. TYPE OF WELL: ☐ WET ☒ GAS ☐ OIL ☐ OTHER

2. TYPE OF COMPLETION: ☒ PERFORATED ☐ PACKER ☐ PLUG ☐ PIPE ☐ OTHER

3. NAME OF OPERATOR
El Paso Natural Gas Company

4. ADDRESS OF OPERATOR
PO Box 980, El Paso, NM 87401

5. LOCATION OF WELL (State, County, Township, Range, Section)
At 8000' 825'S, 1500'E

6. DATE OF WELL LOG
July 16, 1973

7. NAME OF WELL LOGGER
U. S. G. S.

8. PERMIT NO. DATE ISSUED
San Juan New Mexico

9. DATE OF WELL LOG
1-5-73 6-23-73 6-23-73

10. TOTAL DEPTH OF WELL (ft.)
5131'

11. DEPTH OF WELL LOG (ft.)
3322-3322'

12. TYPE OF WELL LOG
FDC-OR, FDC-OR, FDC-OR

13. NAME OF WELL LOGGER
B. WAS

14. CASING (ft.) (Depth of casing set in hole)
8 5/8" 21' 3 3/4" 12 1/4" 129 cu. ft.

15. CEMENT (ft.) (Depth of cement set in hole)
2 7/8" 3' 6 3/4" 638 cu. ft.

16. NAME OF WELL LOGGER
B. WAS

17. DATE OF WELL LOG
6-23-73

18. NAME OF WELL LOGGER
B. WAS

19. DATE OF WELL LOG
6-23-73

20. NAME OF WELL LOGGER
B. WAS

21. DATE OF WELL LOG
6-23-73

22. NAME OF WELL LOGGER
B. WAS

23. DATE OF WELL LOG
6-23-73

24. NAME OF WELL LOGGER
B. WAS

25. DATE OF WELL LOG
6-23-73

26. NAME OF WELL LOGGER
B. WAS

27. DATE OF WELL LOG
6-23-73

28. NAME OF WELL LOGGER
B. WAS

29. DATE OF WELL LOG
6-23-73

30. NAME OF WELL LOGGER
B. WAS

12. PERMIT NO. DATE ISSUED

13. NAME OF WELL LOGGER

14. DATE OF WELL LOG

15. NAME OF WELL LOGGER

16. DATE OF WELL LOG

17. NAME OF WELL LOGGER

18. DATE OF WELL LOG

19. NAME OF WELL LOGGER

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21. NAME OF WELL LOGGER

22. DATE OF WELL LOG

23. NAME OF WELL LOGGER

24. DATE OF WELL LOG

25. NAME OF WELL LOGGER

26. DATE OF WELL LOG

27. NAME OF WELL LOGGER

28. DATE OF WELL LOG

29. NAME OF WELL LOGGER

30. DATE OF WELL LOG

31. NAME OF WELL LOGGER

32. DATE OF WELL LOG

33. NAME OF WELL LOGGER

SIGNATURE OF WELL LOGGER

SIGNATURE OF OPERATOR

SIGNATURE OF WELL LOGGER

DATE OF WELL LOG

DATE OF WELL LOG

DATE OF WELL LOG

NAME OF WELL LOGGER

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INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log of all types of holes and pits 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 regarding the use of this form, and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, other than those listed or will be issued by, or may be obtained from, the local Federal or State office. See instructions on Items 22 and 24, and 25, below regarding separate reports for separate coal seams.

If not filed prior to the time the primary record is submitted, copies of an current available 1:25,000 (or larger) scale map, showing the well location, and the location of the producing tool 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 25.

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 sections 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, tops(s), bottom(s) and name(s) (if any) for only the interval reported in Item 24. 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: "Stacks Completion": Attached supplemental records for this well should show the details of any multiple stage completion and the location of the completing 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 FLOURISH ZONES:		38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL ORIENTED TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		NAME	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
		MEAS. DEPTH	
		TOP	
			Pictured Cliffs
			3318'