

Form approved.
Budget Bureau No. 42-R355.5.

(See other instructions on reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____

5. LEASE DESIGNATION AND SERIAL NO.

SF 080004

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

S. FARM OR LEASE NAME

Florance

9. WELL NO.

9-A

10. FIELD AND POOL, OR WILDCAT

Blanco Pictured Cliffs

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

Sec. 13, T-30-N, R-9-W

12. COUNTY OR	13. STATE
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PARISH
San Juan

13. STATE

New Mexico

15. DATE SPUDDED 11/29/75	16. DATE T.D. REACHED 12/11/75	17. DATE COMPL. (Ready to prod.) 5/26/79 (recomp.)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.) * 5817' GL	19. ELEV. CASINGHEAD 5817'
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20. TOTAL DEPTH, MD & TVD 7050'	21. PLUG, BACK T.D., MD & TVD 6675'	22. IF MULTIPLE COMPL., HOW MANY* 2	23. INTERVALS DRILLED BY →	ROTARY TOOLS O-ID	CABLE TOOLS
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24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	25. WAS DIRECTIONAL
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2570-2642 (Pictured Cliffs) (Recompleted Formation)

26. TYPE ELECTRIC AND OTHER LOGS RUN	97	WAS WELL CORDED
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GR, CCL, CBL, CNL, TDT

27. WAS WELL CORED

No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8"	36#	218'	12 1/2"	200 Sacks	None
7"	23#	3100'	8 3/4"	463 Sacks	None

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
4 1/2"	2780'	7050'	420		1 1/4"	2605'	2725'

31. PERFORATION RECORD (Interval, size and number) 96 holes from 2570' to 2642' (PC)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	2570 - 2642	300 gal 15% HCL

33.* PRODUCTION

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

WELL STATUS (Producing or shut-in) Shut-In - pending pipeline connection

DATE OF TEST 6/4/79	HOURS TESTED 3 hrs.	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD →	OIL—BBL. →	GAS—MCF. Q=809	WATER—BBL. →	FOAM RATIO →
FLOW. TUBING PRESS. 48	CASING PRESSURE 196	CALCULATED 24-HOUR RATE →	OIL—BBL. →	GAS—MCF. AOF=924	WATER—BBL. →		

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	ROF-524
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Will be sold pending hook-up

35. LIST OF ATTACHMENTS

Two series of electric logs were obtained from the well.

Two copies of electric logs forwarded by Schlumberger.

10. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.

SIGNED _____ Admin. Supervisor _____

SIGNED Harry Jackson TITLE Admin. Supervisor DATE 6/14/79

*** (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) (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			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Fruitland	2270	2560			
Pictured Cliffs	2560	2610			
Cliffhouse	4316	4422			
Menefee	4422	4780			
Pt. Lookout	4780	4940			
Mancos	4940	6058			
Gallup	6058	6140			
Greenhorn	6797	6855			
Dakota	6903	TD			