

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.

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 El Paso Natural Gas Company							
3. ADDRESS OF OPERATOR Box 990, Farmington, New Mexico - 87401							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990'S, 990'W At top prod. interval reported below At total depth							
14. PERMIT NO.				DATE ISSUED DEC 9 1968			
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	
W/O. 11-19-68 W/O 11-24-68		12-5-68		6294' OL			
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY	
5520'		5507'				0-5520'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4611 - 5498' (Mesa Verde)							
25. WAS DIRECTIONAL SURVEY MADE No							
26. TYPE ELECTRIC AND OTHER LOGS RUN I-ES, ORI, Temp. Survey							
27. WAS WELL CORED No							
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
9 5/8"		25.4#		174'		No Record	
7"		20#		4517'		8 3/4"	
6 1/2"		10.5#		5520'		6 1/4"	
CEMENTING RECORD		AMOUNT PULLED					
125 Sks.							
300 Sks.							
125 Sks.							
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD		PACKER SET (MD)					
SIZE		DEPTH SET (MD)		CON. COM. DIST. 3			
2 3/8"		5210'					
31. PERFORATION RECORD (Interval, size and number)							
4611-17, 4708-14, 4724-30, 4766-78 w/12 SPZ 5224-36, 5260-66, 5276-88, 5304-16, 5328-34, 5356-62, 5492-98' w/12 SPZ							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED					
4611 - 4778		33,000 gal. water, 35,000# sand					
5224-5498		56,700 gal. water, 64,000# sand 300 gal. acid					
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
		Flowing				Shut In	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
12-5-68		3		3/4"			
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)	
SI 809		SI 811				4671 MCF/D - A.O.F.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							
TEST WITNESSED BY J. B. Goodwin							
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		TITLE				DATE	
		Petroleum Engineer				12-9-68	

*(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:				38. GEOLOGIC MARKERS		
FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Pictured Cliffs	2963	
				Cliff House	4586	
				Mesafee	4776	
				Point Lookout	5212	