

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 _____		5. LEASE DESIGNATION AND SERIAL NO. SF 078040	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DEEP. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE 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. FARM OR LEASE NAME Mudge	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 870°N, 1550'E At top prod. interval reported below At total depth		9. WELL NO. 30	
14. PERMIT NO.		DATE ISSUED	
10. FIELD AND POOL, OR WILDCAT Pictured Cliffs		11. SEC., T., R., M., OR BLOCK AND SURVEY OR ALFA Sec. 12, T-31-N, R-11-W NMPM	
12. COUNTY OR PARISH San Juan		13. STATE New Mexico	
15. DATE SPUDDED 6-27-72	16. DATE T.D. REACHED 7-1-72	17. DATE COMPL. (Ready to prod.) 7-25-72	18. ELEVATIONS (DF, RKB, RT, CR, ETC.)* 6076'GL
20. TOTAL DEPTH, MD & TVD 2955'	21. PLUG BACK T.D., MD & TVD 2944'	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS 0-2955'
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2834-2868'(Pictured Cliffs)			25. WAS DIRECTIONAL SURVEY MADE no
26. TYPE ELECTRIC AND OTHER LOGS RUN IES, FDC-GR; 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
8 5/8"	24#	143'	12 1/4"
2 7/8"	6.4#	2955'	6 3/4" & 7 7/8"
			CEMENTING RECORD
			107 cu. ft.
			629 cu. ft.
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
			SCREEN (MD)
			30. TUBING RECORD
			SIZE
			DEPTH SET (MD)
			tubingless
31. PERFORATION RECORD (Interval, size and number) 2834-48' and 2856-68' with 24 shots per zone			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
2834-2868'		32,000#sand, 34,104 gal. water	
33.* PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing	
WELL STATUS (Producing or shut-in) shut in			
DATE OF TEST 7-25-72	HOURS TESTED 3	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD
FLOW. TUBING PRESS. tubingless	CASING PRESSURE SI 941	CALCULATED 24-HOUR RATE	OIL—BBL. 864 AOF
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY C. Rhames	
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 C. Rhames		TITLE Petroleum Engineer	
		DATE July 27, 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 wells 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 respect to oil and gas wells, shall be ascertained from the Federal or State agency. The instructions on items 22 and 24 must be followed in all cases. Copies of all currently available logs (drill-log, geologist's 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 33.

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 16: 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 23. 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	DESCRIPTION, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Pictured Cliffs	2830'	