Form 9-330 (Rev. 5-63)

SIGNED .

Jack

1-6-76

DATE ____

SUBMIT IN DUPLICATE* Form approved. Budget Bureau No. 42-R355.5. UNITED STATES (See other in-DEPARTMENT OF THE INTERIOR structions on reverse side) 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY = 74216. IF INDIAN, ALLOTTEE OR TRIBE NAME WELL COMPLETION OR RECOMPLETION REPORT AND LOG* 1a. TYPE OF WELL: GAS WELL 7 UNIT AGREEMENT NAME b. TYPE OF COMPLETION: WORK OVER PLUG BACK DEEP-EN NEW WELL Other Plug & S. FARM OR LEASE NAME 2. NAME OF OPERATOR Chaco Monument 3. ADDRESS OF OPERATOR 10. FIELD AND POOL, OR WILDCAT EOX 1745. EOUSTON. Texas 77001
CATION OF WELL (Report location clearly and in accordance with any State requirements)* <u>il lucă t</u> 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 990' FSL and 2166' FML At surface At top prod. interval reported below Same Same .IAN At total depth 13 - 204 - 84 12. COUNTY OR PARISH 13. STATE 14. PERMIT NO. DATE ISSUED McKinley 19. ELEV. CASINGHEAD 15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) | 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* P a n 12-22-75 6544 GR & 6558.5 KB 6544 12-5-75 12-16-75 22. IF MULTIPLE COMPL., HOW MANY* CABLE TOOLS 20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 23. INTERVALS ROTARY TOOLS DRILLED BY 0 - 5465.ione WAS DIRECTIONAL SURVEY MADE 24. PRODUCING INTERVAL(S), OF THIS COMPLETION-TOP, BOTTOM, NAME (MD AND TVD)* P A A - See Sundry Notice on Abandonment 26. Type Electric and other logs RUN Yes 27. WAS WELL CORED Dual Induction - Focused, Densilog, compensated neutron, DNC sonic 110 CASING RECORD (Report all strings set in well) CASING SIZE WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING RECORD AMOUNT PULLED 200 sks Class "A" + 40.5 239 14 3/4 10 3/4" 2% CaCle Cement Circ Hone 29. LINER RECORD 30. TUBING RECORD SIZE TOP (MD) BOTTOM (MD) DEPTH SET (MD) SACKS CEMENT* SCREEN (MD) SIZE PACKER SET (MD) 31. PERFORATION RECORD (Interval, size and number) ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 33 * PRODUCTION WELL STATUS (Producing or shut-in) DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping-size and type of pump) DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL----BBL. GAS-MCE. WATER-BBL. GAS-OIL RATIO TEST PERIOD FLOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE -BRI GAS---MCF. OIL GRAVITY-API (CORR.) WATER--BBL. 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY 35. LIST OF ATTACHMENTS 36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

TITLE

Agent