

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. Jicarilla Joint Venture	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
2. NAME OF OPERATOR Odessa Natural Corp. ATT: John Strojek		7. UNIT AGREEMENT NAME	
8. ADDRESS OF OPERATOR P.O. Box 3908, Odessa, TX 79760		8. FARM OR LEASE NAME Jicarilla Joint Venture "KD"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2,100' FSL, 2,010' FEL At top prod. interval reported below, Same At total depth Same		9. WELL NO. 5	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Chacon Dakota Associated Oil Pool	
DATE ISSUED		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 10-T23N-R3W N.M.P.M.	
15. DATE SPUDDED 10-11-77		12. COUNTY OR PARISH Rio Arriba	
16. DATE T.D. REACHED 10-26-77		13. STATE NM	
17. DATE COMPL. (Ready to prod.) 12-24-77		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 7,210' DF, 7,211' KB	
19. ELEV. CASINGHEAD 7,197' GR		20. TOTAL DEPTH, MD & TVD 7,570'	
21. PLUG BACK T.D., MD & TVD 7,342'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY →		ROTARY TOOLS X	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7180-7314, Dakota		CABLE TOOLS	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Induction and CNL-FDC	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
CASING SIZE 8 5/8		WEIGHT, LB./FT. 24.0	
DEPTH SET (MD) 248		HOLE SIZE 12 1/4	
CEMENTING RECORD 250 sx		AMOUNT PULLED None	
4 1/2		10.50&11.60 7404	
7 7/8		750 sx	
None		None	
29. LINER RECORD		30. TUBING RECORD	
SIZE None		SIZE 2 3/8	
TOP (MD)		DEPTH SET (MD) 7223	
BOTTOM (MD)		PACKER SET (MD) None	
SACKS CEMENT*		31. PERFORATION RECORD (Interval, size and number) 7180'-7241', 1 sht. per foot 7297'-7314', 2 shts per foot	
SCREEN (MD)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33.* PRODUCTION DATE FIRST PRODUCTION Waiting on Pipeline PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) Shut in		DEPTH INTERVAL (MD) 7180'-7241' 7297'-7314'	
DATE OF TEST 1-19-78		AMOUNT AND KIND OF MATERIAL USED 86,180 80,000 50,430 40,000	
HOURS TESTED 24		OIL—BBL. 105	
CHOKE SIZE 3/4"		GAS—MCF. 550	
PROD'N. FOR TEST PERIOD →		WATER—BBL. -0-	
OIL—BBL. 105		GAS—MCF. 550	
CALCULATED 24-HOUR RATE →		WATER—BBL. -0-	
FLOW. TUBING PRESS. 200psig		OIL GRAVITY-API (CORR.) 47.0	
CASING PRESSURE 500psig		TEST WITNESSED BY	
34. DISPOSITION OF GAS (Solid, used for fuel, vented, etc.) Vented		35. LIST OF ATTACHMENTS	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records. For: Odessa Natural Corporation SIGNED: <i>[Signature]</i> Ewell N. Walsh, P.E.		President, Walsh Engineering & Production Corp. DATE: 2-01-78	

*(See Instructions and Spaces for Additional Data on Reverse Side)

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: 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.)

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