

WELL COMPLETION AND CO. REPORT FORM AND LOG

1. YEAR OF COMPLETION: NEW ☒ WORK OVER ☐ RE-ENTER ☐ PLUG BACK ☐ RE-ENTER ☐ Other _____

2. NAME OF OPERATOR: Odessa Natural Corporation Att: John Strojek

3. ADDRESS OF OPERATOR: P.O. Box 3908 Odessa, Texas 79760

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements):
At surface: 1695' PNL, 1850' FWL
At top prod. interval reported below: Same
At total depth: Same

5. NAME OF LEASE NAME: Jicarilla Joint Venture "PC"

6. WELL NO.: 104

7. COUNTY OR PARISH: Rio Arriba N.M.

8. STATE: N.M.P.M.

9. ELEVATION (OF, HUB, RT. GE, ETC.): 7290'D.F., 7291'KB, 7279'GL

10. DATE T.D. REACHED: 7-3-78

11. DATE COMPL. (Ready to prod.): 7-24-78

12. TOTAL DEPTH, MD & TVD: 3395

13. PLUG BACK T.D., MD & TVD: 3322

14. IF MULTIPLE COMPLETIONS, HOW MANY: 23

15. INTERVALS DRILLED BY: X

16. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*: 3158'-3192' Pictured Cliffs

17. WAS DIRECTIONAL SURVEY MADE: No

18. TYPE ELECTRIC AND OTHER LOSS RUN: IES & CNL-FDC

19. WAS WELL CORED: No

20. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8	24.0	145'	12-1/4	125 Sacks	None
4-1/2	10.50	3376'	7-7/8	190 Sacks	None

21. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
None				

22. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
1-1/4	3128'	None

23. PERFORATION RECORD (Interval, size and number)

INTERVAL (MD)	ONE SHOT PER FOOT
3158 -3165)	
3174 -3179)	One shot per foot
3184 -3192)	

24. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3158-3192	55,000 gal. water
	55,000 lbs. sand

25. 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

DATE OF TEST: 8-9-78

HOURS TESTED: 3 hrs

CHOKED SIZE: 3/4"

PROD'N. FOR TEST PERIOD: 3/4" -853

OIL—BBL.: CAOF -1,072

GAS—MCF.: 3/4" -853

WATER—BBL.: 3/4" -853

GAS-OIL RATIO: 3/4" -853

FLOW, TUBING PRESS.: 57 psig

CASING PRESSURE: 450 psig

DISPOSITION OF GAS (Sold, used for fuel, vented, etc.): Vented

SIPT-930 psig C-940 psig

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

SIGNED: Ewell N. Walsh, P.E. TITLE: President, Walsh Eng. & Production Corp. DATE: 8-14-78

*(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 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 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: CORRD 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, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Ojo Alamo	2730	2730
				Kirtland	2980	2980
				Fruitland	3050	3050
				PicturedCliffs	3155	3155
				Lewis	3265	3265