

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved, Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

SF-079150

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

PLC OCE Federal

9. WELL NO.

1-19

10. FIELD AND POOL, OR WILDCAT

Blanco Pictured Cliffs

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Section 19, T23N, R1W

12. COUNTY OR PARISH

Sandoval

13. STATE

New Mexico

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1A. TYPE OF WELL: OIL WELL [] GAS WELL [X] DRY [] Other []

b. TYPE OF COMPLETION: NEW WELL [X] WORK OVER [] DEEP-EN [] PLUG BACK [] DIFF. RESVR. [] Other []

2. NAME OF OPERATOR: Petro Lewis Corporation

3. ADDRESS OF OPERATOR: P. O. Box 2250, 717 17th Street, Denver, CO 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements): At surface 1600' FSL and 1600' FEL (NWSE)

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO. DATE ISSUED 4 S. GEOLOGICAL SURVEY

15. DATE SPUNDED 9-21-81 16. DATE P.D. REACHED 9-23-81 17. DATE COMPL. (Ready to prod.) 11-10-81 18. ELEVATIONS (DE, RKB, RT, GR, ETC.)* 7390' GR 7402' KDB

20. TOTAL DEPTH, MD & TVD 3175' 21. PLUG, BACK T.D., MD & TVD 3036' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY Surface-TD

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2935-3016' Blanco Pictured Cliffs 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN Schlumberger DIL and FDC w/CNL 27. WAS WELL CORED No

Table with 5 columns: CASINO SIZE, WEIGHT, LB./FT., DEPTH SET (MD), HOLE SIZE, CEMENTING RECORD, AMOUNT PULLED. Includes data for 8-5/8, 4-1/2 casings and cementing details.

Table with 4 columns: LINER RECORD (SIZE, TOP (MD), BOTTOM (MD), SACKS CEMENT*), TUBING RECORD (SIZE, DEPTH SET (MD), PACKER SET (MD)).

Table with 2 columns: PERFORATION RECORD (Interval, size and number) and ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. Includes data for 2935-38' interval and acid treatment details.

33.* PRODUCTION: DATE FIRST PRODUCTION 11-30-81, PRODUCTION METHOD Flowing, WELL STATUS Shut-in.

Table with 8 columns: DATE OF TEST, HOURS TESTED, CHOKE SIZE, PROD'N. FOR TEST PERIOD, OIL—BBL., GAS—MCF., WATER—BBL., GAS-OIL RATIO. Includes test data for 11-30-81.

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented during test, to be sold. TEST WITNESSED BY Joe Elledge

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 Joe Elledge TITLE Agent ACCEPTED FOR RECORD 5, 1982

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

MAR 16 1982

NMOCC

FARMINGTON DISTRICT BY [Signature]

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.)

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VEERT. DEPTH
				Ojo Alamo Kirtland Fruitland Pictured Cliffs	2500' 2752' 2786' 2883'	

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