

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

1a. TYPE OF WELL:						OIL WELL ☐ GAS WELL ☐ DRY ☐ Other <u>Strat Hole</u>					
b. TYPE OF COMPLETION:											
NEW WELL ☐		WORK OVER ☐		DEEP-EN ☐		PLUG BACK ☐		DIFF. RESVR. ☐		Other _____	
2. NAME OF OPERATOR <u>Mobil Oil Corporation</u>											
3. ADDRESS OF OPERATOR <u>Three Greenway Plaza East, Suite 830, Houston, Texas 77046</u>											
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface <u>1800' FWL & 1800' FHL, Sec. 22, T-22-N, R-15-W</u> At top prod. interval reported below At total depth											
						14. PERMIT NO.			DATE ISSUED		
7. UNIT AGREEMENT NAME						S. FARM OR LEASE NAME					
						<u>"Unit G"</u>					
9. WELL NO.						10. FIELD AND POOL, OR WILDCAT					
						<u>Willcat</u>					
11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA						12. COUNTY OR PARISH					
<u>Sec. 22, T-22-N, R-15-W</u>						<u>San Juan</u>					
						13. STATE					
						<u>New Mexico</u>					
15. DATE STUDDERED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, REB, RT, GE, ETC.)*			19. ELEV. CASING HEAD		
<u>7-8-75</u>		<u>7-1-76</u>		<u>-</u>		<u>57800'</u>					
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS		CABLE TOOLS	
<u>4240</u>		<u>-</u>		<u>-</u>		<u>→</u>					
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*										25. WAS DIRECTIONAL SURVEY MADE	
										<u>No</u>	
26. TYPE ELECTRIC AND OTHER LOGS RUN										27. WAS WELL CORED	
<u>Schl. Dual IES, H. GR & Sonic-Century Log Co. SP-GA-Resistivity</u>										<u>Yes</u>	
28. CASING RECORD (Report all strings set in well)											
CASING SIZE	WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	CEMENTING RECORD			AMOUNT PULLED		
<u>7"</u>	<u>17.4</u>		<u>120</u>		<u>9-7/8</u>	<u>115 x C/c.</u>			<u>-</u>		
					<u>5-5/8</u>						
29. LINER RECORD						30. TUBING RECORD					
SIZE	TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)		PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number)						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
<u>Stratigraphic Test</u>						DEPTH INTERVAL (MD)					
<u>Drip. Dry Test 7-10-75</u>						AMOUNT AND KIND OF MATERIAL USED					
<u>See Daily Drilling Summary Attached</u>						<u>JAN 10 1977</u>					
33. PRODUCTION											
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)							WELL STATUS (Producing or shut-in)		
DATE OF TEST	HOURS TESTED	CHOKER SIZE	FROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO				
			<u>→</u>								
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)					
		<u>→</u>									
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)											
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 <u>[Signature]</u>				TITLE <u>Authorized Agent</u>				DATE <u>1-3-77</u>			

*(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 37.

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; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38.	GEOLOGIC MARKERS	
					NAME	MEAS. DEPTH
Sd & Shale	0	2870			Point Lookout	1937
Shale	2870	3565			Gallup	2960
Sd & Shale	3565	4157			Dakota	3937
Shale	4157	4260 TP			Morrison	4191