

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved, U  
Budget Bureau No. 1004-0137  
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG\*

|                                                                                                                               |  |                                              |                                              |                                                    |                                    |                                      |             |
|-------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------|----------------------------------------------|----------------------------------------------------|------------------------------------|--------------------------------------|-------------|
| 1a. TYPE OF WELL:                                                                                                             |  | OIL WELL <input type="checkbox"/>            | GAS WELL <input checked="" type="checkbox"/> | DRY <input type="checkbox"/>                       | (Other) _____                      |                                      |             |
| b. TYPE OF COMPLETION:                                                                                                        |  | NEW WELL <input checked="" type="checkbox"/> | WORK OVER <input type="checkbox"/>           | DEEP-EN <input type="checkbox"/>                   | PLUG BACK <input type="checkbox"/> | DIFF. DENAR <input type="checkbox"/> | Other _____ |
| 2. NAME OF OPERATOR                                                                                                           |  | El Paso Natural Gas Company                  |                                              |                                                    |                                    |                                      |             |
| 3. ADDRESS OF OPERATOR                                                                                                        |  | PO Box 4289, Farmington, NM 87499            |                                              |                                                    |                                    |                                      |             |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*                                  |  | At surface 1560'S, 1610'W                    |                                              |                                                    |                                    |                                      |             |
| At top prod. interval reported below                                                                                          |  |                                              |                                              |                                                    |                                    |                                      |             |
| At total depth                                                                                                                |  |                                              |                                              |                                                    |                                    |                                      |             |
| 14. PERMIT NO.                                                                                                                |  | 30-039-24468                                 |                                              | DATE ISSUED                                        |                                    |                                      |             |
| 15. DATE SPUDDED                                                                                                              |  | 11-29-89                                     |                                              | 16. DATE T.D. REACHED 02-05-90                     |                                    |                                      |             |
| 17. DATE COMPL. (Ready to prod.)                                                                                              |  | 02-11-90                                     |                                              | 18. ELEVATIONS (DP, RKB, RT, OR, ETC.)* 6828' GL   |                                    |                                      |             |
| 19. ELEV. CASINGHEAD                                                                                                          |  |                                              |                                              |                                                    |                                    |                                      |             |
| 20. TOTAL DEPTH, MD & TVD                                                                                                     |  | 3741'                                        |                                              | 21. PLUG BACK T.D., MD & TVD                       |                                    |                                      |             |
| 22. IF MULTIPLE COMPL., HOW MANY*                                                                                             |  | 1                                            |                                              | 23. INTERVALS DRILLED BY                           |                                    |                                      |             |
| 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*                                                 |  | Fruitland Coal - uncemented Liner            |                                              | 25. WAS DIRECTIONAL SURVEY MADE                    |                                    |                                      |             |
| 26. TYPE ELECTRIC AND OTHER LOGS RUN                                                                                          |  | none                                         |                                              | 27. WAS WELL CORRED                                |                                    |                                      |             |
| 28. CASING RECORD (Report all strings set in well)                                                                            |  |                                              |                                              | 29. LINER RECORD                                   |                                    |                                      |             |
| 30. TUBING RECORD                                                                                                             |  |                                              |                                              | 31. PERFORATION RECORD (Interval, size and number) |                                    |                                      |             |
| 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.                                                                                |  |                                              |                                              | 33. PRODUCTION                                     |                                    |                                      |             |
| 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)                                                                    |  | To be sold                                   |                                              | 35. LIST OF ATTACHMENTS                            |                                    |                                      |             |
| 36. I hereby certify that the foregoing and attached information is complete and correct as determined from available records |  |                                              |                                              | 37. SIGNED _____                                   |                                    |                                      |             |
| 38. TITLE                                                                                                                     |  | Regulatory Affairs                           |                                              | DATE 3-14-90                                       |                                    |                                      |             |

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

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

| 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, flowing and shut-in pressures, and recoveries): |       |         |                                                                        | 38. GEOLOGIC MARKERS               |                      |                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------|------------------------------------------------------------------------|------------------------------------|----------------------|------------------|
| FORMATION                                                                                                                                                                                                                           | TOP   | BOTTOM  | DESCRIPTION, CONTENTS, ETC.                                            | NAME                               | TOP                  |                  |
|                                                                                                                                                                                                                                     |       |         |                                                                        |                                    | MEAS. DEPTH          | TRUE VERT. DEPTH |
| Ojo Alamo                                                                                                                                                                                                                           | 2765' | 2960    | White, cr-gr ss..                                                      |                                    |                      |                  |
| Kirtland                                                                                                                                                                                                                            | 2960' | 3470    | Gry sh interbedded w/tight, gry, fine-gr ss.                           |                                    |                      |                  |
| Fruitland                                                                                                                                                                                                                           | 3470' | 3741 TD | Dk gry-gry carb sh, ccal, grn silts, light-med gry, tight, fine gr ss. | Ojo Alamo<br>Kirtland<br>Fruitland | 2765<br>2960<br>3470 |                  |