

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1 a. TYPE OF WELL:

OIL WELL ☐ GAS WELL ☒ DRY ☐ OTHER NEW COMPLETION

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. PRESS. ☐ OTHER ☐

2. NAME OF OPERATOR

VASTAR RESOURCES, INC.

3. ADDRESS AND TELEPHONE NO.

1816 E. MOJAVE, FARMINGTON, NM 87401

(505) 599-4300 DEC 2000

4. LOCATION OF WELL

(Report location clearly and in accordance with any State requirements)*

At surface 1190' FNL & 790' FEL

At top prod. interval reported below SAME

At total depth SAME

14. PERMIT NO.

C. BEECHAM

DATE ISSUED

04/29/98

12. COUNTY OR PARISH

RIO ARriba

13. STATE

NM

15. DATE SPUDDED

07/09/00

16. DATE T.D. REACHED

07/15/00

17. DATE COMPL. (Ready to prod.)

08/23/00

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

7211 KB

7195 GL

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

4100

21. PLUG, BACK T.D., MD & TVD

4050

22. IF MULTIPLE COMPL. HOW MANY*

23. INTERVALS DRILLED BY



ROTARY TOOLS

0-4100

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION - TOP, BOTTOM, NAME (MD AND TVD)*

FRUITLAND 3960-4016

25. WAS DIRECTIONAL SURVEY MADE

NO

26. TYPE ELECTRIC AND OTHER LOGS RUN

CNL/GR/NL & MUD LOG

27. WAS WELL CORED

NO

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

CASING SIZE/GRADE	WEIGHT, LB./FT	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
8 5/8 J-55	24#	423	12 1/4	GL 300SX	NONE
5 1/2 K-55	15.5#	4093	7 7/8	GL 950SX	NONE

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1.9	3955	None

31. PERFORATION RECORD (Interval, size and number)

3960-81 (19') and 4012 -16 (4') , Total 23'
w / 4spf, 92 holes w/ 0.42" diameter.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3960-4016	500 GAL 10% Formic acid
	followed w/ 82,900 gal Delta frac
	140 gel containing 1920 sx 20/40
	Brady sand.

33.* PRODUCTION

35.

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping - size and type of pump)				WELL STATUS (Producing or shut-in)	
		FLOWING				SI-WOPLC	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL - BBL.	GAS - MCF.	WATER - BBL.	GAS-OIL RATIO
08/29/00	24	1/2	————→		190	90	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL - BBL.	GAS - MCF.	+	WATER - BBL.	OIL GRAVITY - API (CORR.)
60	380	————→					

COPIED FOR RECORD

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

VENTED

TEST WITNESSED BY

MAX SIMS DEC 07 2000

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 [Signature] TITLE WORKOVER SUPERVISOR DATE 09/04/00

(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.

x
✓

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

FORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000

5. Lease Serial No.
NM - 30015

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement Name and/or No.

8. Well Name and No.
CARRACAS 31 B 1

9. API Well No.
3003925872

10. Field and Pool, or Exploratory Area
BASIN FRUITLAND COAL

11. County or Parish, and State
ARRIBA NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well ☐ Oil Well ☒ Gas Well Other

2. Name of Operator
VASTAR RESOURCES, INC.

3a. Address P.O. BOX 3092
HOUSTON, TX 77253

3b. Phone No.(include area code)
281.366.4491

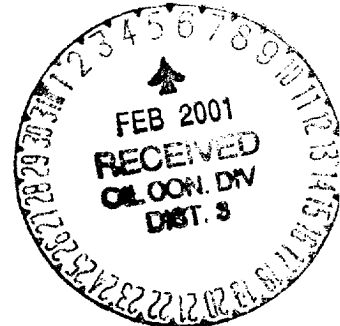
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
790FEL 1190FNL 31-32N-4W

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be files within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Formation Tops as per your request:Ojo Alamo 3352'Kirtland 3480'Main Coal 3957'



Electronic Submission #2454 verified by the BLM Well Information System for VASTAR RESOURCES, INC. Sent to the Farmington Field Office
Committed to AFMSS for processing by Maurice Johnson on 01/31/2001

Name (Printed/Typed) MARY CORLEY Title AUTHORIZED REPRESENTATIVE

Signature _____ Date 01/26/2001

THIS SPACE FOR FEDERAL OR STATE OFFICE USE ACCEPTED FOR RECORD

Approved By _____ Title _____ Date 01/26/2001

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. NMOCC

Office ARMSTRONG FIELD OFFICE