

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

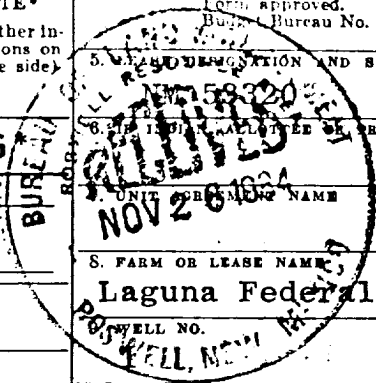
SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____
 b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESVR. Other P & A
 2. NAME OF OPERATOR
Samedan Oil Corporation
 3. ADDRESS OF OPERATOR
1616 Glenarm Pl., #2550, Denver, CO 80202



4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
 At surface 1860 FEL & 1660 FSL, Sec 14, T3N-R12W
 At top prod. interval reported below
 At total depth SAME
 5. FARM OR LEASE NAME:
Laguna Federal
 10. FIELD AND POOL, OR WILDCAT
Wildcat
 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
Sec 14, T3N-R12W

14. PERMIT NO. None Assigned DATE ISSUED _____
 12. COUNTY OR PARISH Catron 13. STATE NM

15. DATE SPUDDED 10/18/84 16. DATE T.D. REACHED 11/9/84 17. DATE COMPL. (Ready to prod.) P & A 11/12/84 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 7343 KB 19. ELEV. CASINGHEAD 7330

20. TOTAL DEPTH, MD & TVD 5915 21. PLUG, BACK T.D., MD & TVD P & A 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS 0-5915 CABLE TOOLS None

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
NONE
 25. WAS DIRECTIONAL SURVEY MADE
No

26. TYPE ELECTRIC AND OTHER LOGS RUN
DIL/GR/SP; BHS/GR, Den/Neutron/GR
 27. WAS WELL CORED
No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8	36	1915	12-3/4	1215 sks to surface	0
7	23	3992	8-3/4	150 sks	3065

29. LINER RECORD

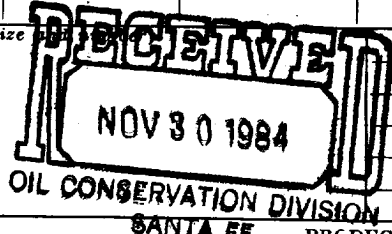
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size, etc.)

DEPTH INTERVAL (MD)	ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	AMOUNT AND KIND OF MATERIAL USED



33.* DATE FIRST PRODUCTION NA PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) _____ WELL STATUS (Producing or shut-in) P & A

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) _____ TEST WITNESSED BY PETER W. CHESTER

35. LIST OF ATTACHMENTS _____ DATE NOV 27 1984

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

SIGNED Gary L. Brune TITLE Division Production Superintendent DATE 11/21/84

*(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 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.)

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				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Gallup Sand	1280			Dakota	2070	
Gallup Sand	1752			Chinle	2366	
Dakota Sand	2070			San Andres	3608	
Dakota Sand	2195			Glorieta.	3914	
Yeso* DST	4246	4360	DST 4246-4360 IF 10 min 67-1216 psi ISI 60 " 1442 " " FF 60 " 1215-1442 " FSI 120 " 1449 "	Yeso	4014	
			Rec. 370' mud 277' MC Water 2776' water. Chlorides 900 PPM	Meseta Blanca	5076	
				Abo	5650	
				Granite	5730	