

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE
N. M. OIL CONS. COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

SE Chaves Queen Gas Area Asso

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

Sec. 34 T13S R30E

12. COUNTY OR PARISH

Chaves Cty

13. STATE

NM

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
Bison Petroleum Corporation

3. ADDRESS OF OPERATOR
203 W. 8th Suite 510 Amarillo, TX 79101

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 1980 FSL 1485 FWL Unit K

At top prod. interval reported below same

At total depth same

14. PERMIT NO. DATE ISSUED

15. DATE SPUNDED 8-19-83 16. DATE T.D. REACHED 8-22-83 17. DATE COMPL. (Ready to prod.) n/a 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3863.2 Gr 3870 KB 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 2245' 21. PLUG. BACK T.D., MD & TVD 2211' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY → 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 CRC Gamma Ray Neutron Log 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
8 5/8"	24#	606'	12 1/4	283 sx Cl C w/2% CaCl2	
5 1/2"	15.5#	2245'	7 7/8	256 sx Halite	589.03

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	2125'	none

31. PERFORATION RECORD (Interval, size and number)			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
INTERVAL (MD)	SIZE	NUMBER	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2134-44 (KB)	.35"	1 spf	2134-44 - Frac	500 gal 15% HCl 22,500# sand 20,000 gal gelled KCl wtr

33. PRODUCTION
DATE FIRST PRODUCTION n/a 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.)

35. LIST OF ATTACHMENTS
2 copies of GRN log

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.
SIGNED: [Signature] TITLE: President

ACCEPTED FOR RECORD
PETER W. CHESTER
JUN 14 1985
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*(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 production 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: "Seals 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 BRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CURSION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS	
				NAME	TOP
				MEAS. DEPTH	TRUE VERT. DEPTH
Recent					
Quaternary	0	580	Red beds & shale	580	580
Rustler	580	622	Anhydrite & salt	622	622
Salado	622	1195	Red shale & salt	1195	1195
Tansill	1195	1395	Anhydrite & salt	1395	1395
Yates	1395	1510	Red sand & shale, anhydrite, salt	1510	1510
Seven Rivers	1510	2223	Red 7 gray sand, red shale, anhydrite salt		

RECEIVED
JUN 18 1985