



2901 EAST 20TH STREET • P.O. BOX 50 • FARMINGTON, NEW MEXICO 87499

PHONE (505) 325-1702

December 18, 1990

New Mexico Oil Conservation Commission
P. O. Box 2088
Santa Fe, New Mexico 87501

Attn: Mr. David Catanack

Re: Application for Authorization to Inject
Noo Navajo #2 Well, 330' FNL, 1750' FEL,
Section 13, T20N, R6W, N.M.P.M.
McKinley County, New Mexico

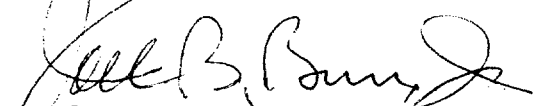
Gentlemen:

Enclosed please find a copy of Application for Authorization to Inject on the above referenced well, the original of which has this date been filed with the Oil Conservation Commission, Division of Energy and Minerals Department, Aztec, New Mexico.

If you have any questions concerning this application please advise.

Very truly yours,

BASIN FUELS, LTD.



Joel B. Burr, Jr.

JBB/m
Enc.



2901 EAST 20TH STREET • P.O. BOX 50 • FARMINGTON, NEW MEXICO 87499

PHONE (505) 325-1702

December 13, 1990

Mr. Ernie Busch
New Mexico Oil Conservation Division
1000 Rio Brazos Rd.
Aztec, New Mexico 87410

Re: Authorization to Inject
Noo Navajo #2 Well
Franciscan Lake Mesa Verde Field
McKinley County, New Mexico

Dear Mr. Busch:

Submitted herewith please find Form C-108 and necessary attachments for authorization to inject produced water into the subject well. This project is an extension of the existing disposal system (reference NMOCD Order #R-5540) and should qualify for administrative approval.

Injection will be through Mesa Verde perforations for 2704' KB to 2746' KB. Maximum anticipated injection rate is 700 BWPD. Maximum injection pressure will initially be limited to 541 PSI (0.2 PSI x 2704 ft.). However, we would expect to change this limit based on subsequent step rate testing.

Based on available geologic and engineering data as well as historic performance of the existing injection project, we find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.

Proof of Publication of Notice will be forwarded subsequent to this application. Should you require further information or have any questions regarding this matter please call this office or Bradley Salzman at 326-0550.

Very truly yours,

BASIN FUELS, LTD.

Joel B. Burr, Jr.

JBB/m
Enc.

APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Pressure Maintenance ☒ Disposal ☐ Storage
Application qualifies for administrative approval? ☐ yes ☐ no
- II. Operator: Basin Fuels, Ltd.
Address: P. O. Box 50, Farmington, N.M. 87499
Contact party: Joel B. Burr, Jr. Phone: (505) 325-1701
- III. Well data: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? ☒ yes ☐ no #R-5540
If yes, give the Division order number authorizing the project _____.
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- * VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. Attach appropriate geological data on the injection zone including appropriate lithologic detail, geological name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such source known to be immediately underlying the injection interval.
- IX. Describe the proposed stimulation program, if any.
- * X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.)
- * XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certification
- I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
- Name: B. W. Salzman Title: Consulting Engineer
Signature: B. W. Salzman Date: December 12, 1990
- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal.

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; location by Section, Township, and Range; and footcage location within the section.

- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.

- (3) A description of the tubing to be used including its size, lining material, and setting depth.

- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.

- (2) The injection interval and whether it is perforated or open-hole.

- (3) State if the well was drilled for injection or, if not, the original purpose of the well.

- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.

- (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location. Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;

- (2) The intended purpose of the injection well; with the exact location of single wells or the section, township, and range location of multiple wells;

- (3) The formation name and depth with expected maximum injection rates and pressures; and

- (4) a notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, P. O. Box 2080, Santa Fe, New Mexico 87501 within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing or administrative applications within 15 days from the date this application was mailed to them.

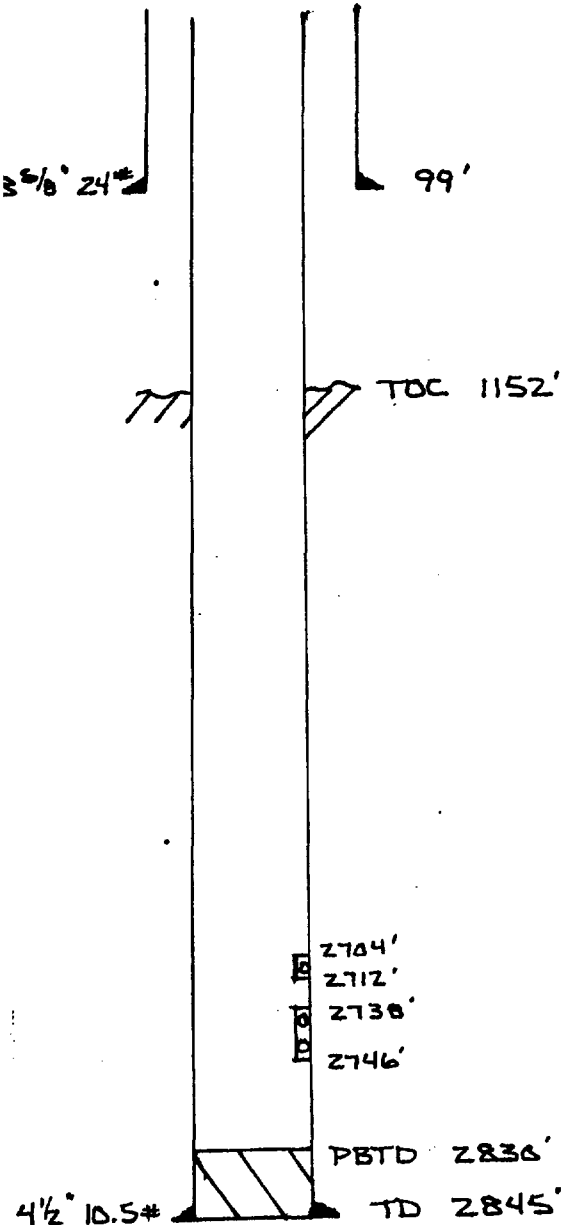
Detail of C-108, Re: Basin Fuels, Ltd. Application
Noo Navajo #2 Well

- I. See C-108
- II. See C-108
- III. See attached Injection Well Data Sheet
- IV. See C-108
- V. See Attached Map
- VI. See Attached C-104's
- VII.
 - 1. Anticipated average injection rate 450 BWPD. Anticipated maximum rate, 700 BWPD.
 - 2. This will be a closed system.
 - 3. Maximum injection pressure 541 PSI.
 - 4. Injection fluid will be limited to produced water from Mesa Verde Formation.
 - 5. N/A
- VIII. Injection will be limited to the Menefee Interval of the Mesa Verde Formation as shown on Well Bore Schemater. There are no underground sources of drinking water in the subject area.
- IX. The existing well bore will be used as is and no stimulation program is planned at this time.
- X. Logs on the subject well have been filed with the New Mexico Oil Conservation Division
- XI. N/A
- XII. Based on available geologic and engineering data as well as historic performance of the existing injection project, we find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.
- XIII. See attached letter to The Gallup Independent newspaper, a copy of actual publication will be forwarded to you upon our receipt.

INJECTION WELL DATA SHEET

Basin Fuels, Ltd. Noo Navajo
 OPERATOR LEASE
 2 330' FNL-1750' FEL - Sec. 13, T20N-R6W
 WELL NO. FOOTAGE LOCATION SECTION TOWNSHIP RANGE
 McKinley County, New Mexico

Schematic



Tabular Data

Surface Casing

Size 8-5/8 " Cemented with 100 sx.
 TOC Surface feet determined by Circ.
 Hole size 12-1/4"

Intermediate Casing

Size N/A " Cemented with sx.
 TOC feet determined by
 Hole size

Long string

Size 4-1/2 " Cemented with 325 sx.
 TOC 1152' KB feet determined by CBL
 Hole size 7-7/8"
 Total depth 2845' KB

Injection interval

2746' feet to 2704' feet
 (perforated or open-hole, indicate which)

Tubing size 2-3/8" lined with Spinkote 850 set in a
 (material)
 Baker Model "D" packer at 2600' feet
 (brand and model)

(or describe any other casing-tubing seal).

Other Data

- Name of the injection formation Mesa Verde
- Name of Field or Pool (if applicable) Franciscan Lake Mesa Verde
- Is this a new well drilled for injection? ☐ Yes ☒ No
 If no, for what purpose was the well originally drilled? Producing Oil Well
- Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used) None
- Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. None

BASIN FUELS LTD.

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11

12 Easter Flats

BASIN FUELS LTD.
Easter Flats

KmV Ø T.A.'77

Mc Collum

JOEL B. BURR

KmV Ø D.A.'78

Robinson-
Coleman

GEO. E. COLEMAN

Robinson-
Coleman

KmV Ø D.A.'79

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Navajo Noo

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Navajo Noo

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R-6-W

R-5-W

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BASIN FUELS LTD.

1 EAGLE PETR.
Eagle Devl.
KmV, 91 Ø D.A.'86

18

1 BASIN FUELS
Steppin Out
T.D.: 2780'
KmV Ø D.A.'79
P.A. APPROVED '82

Joy Joy

KmV Ø D.A.'84

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UNITED STATES SUBMIT
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐ RECEIVED

b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESV. ☐ Other MAY 30 1995

2. NAME OF OPERATOR
Eagle Petroleum, Inc.

3. ADDRESS OF OPERATOR P.O. Box 2905, Gulfport, Mississippi 39205

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 2200' FEL and 990' FNL

At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
1-10-85	1-16-85	3-6-85	6741' GL	6741'

20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMFL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
3984'	3520'	1	→	O-TD	

24. PRODUCING INTERVAL(S), OF THIS COMPLETION-- TOP, BOTTOM, NAME (MD AND TVD)* Mesaverde (Menefee) 2072' - 2420'	25. WER DIRECTIONAL SURVEY MADE
--	------------------------------------

26. TYPE ELECTRIC AND OTHER LOGS RUN | 27. WAS WELL CORED

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

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8"	36#	103'	12 1/4	147½ ft3 C1"B" 2% Ca C1 2	
7"	23#	3484.51	8 3/4	691 ft3 50:50 poz, C1 B	

29.	LINER RECORD	30.	TUBING RECORD
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SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
4 1/2"	3318'	3984'	82.6 ft 3				

31. PERFORATION RECORD (Interval, size and number)	32	ACID SHOT. FRACTURE. CEMENT SQUEEZE. ETC.
--	----	---

2722' - 2730' W/26PF BP
2072' - 2078', 2179' - 2184', 2346' - 2356'
2416' - 2420'

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2722' - 2730'	
2072' - 2420'	

33.° PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
3-11-85	Swabbing	Shut-in

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4-30-85			→				

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL--BBL. WATER--BBL.	OIL GRAVITY-API (CORR.)
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34. DISPOSITION OF GAN (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 James H. H. H. H. TITLE _____ DATE _____

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

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.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Gallup Mancos Point Lookout Menefee Cliff House Lewis Pictured Cliffs Fruitland Ojo Alamo	3653 2910 2718 1899 1300 730 512 402 Surface	N.R. 3653 2910 2716 1899 928 730 512	Gallup perfs 3905, 09, 11, 20, 24, 28, 31, 36, 38, 40 50, 3550, 75, 3621, 44, 63, 3706 36, 70, 94, 3804, 26, 43, 3855 Frac'd w/75,000 gal. water & 64,000 #20/40 sd. Temporarily Abandoned			

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved,
Budget Bureau No. 1-1-1-1-1

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 ☐								
2. NAME OF OPERATOR Basin Fuel, Inc.															
3. ADDRESS OF OPERATOR 152 Petroleum Center Bldg., Farmington, NM 87401															
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330' FEL & 2310' FNL At top prod. interval reported below same At total depth same															
14. PERMIT NO.			DATE ISSUED												
15. DATE SPUDDED 5-28-76															
16. DATE T.D. REACHED 6-8-76															
17. DATE COMPL. (Ready to prod.) 8-27-76															
18. ELEVATIONS (DF, REB, RT, OR, ETC.)* 6806 KB & 6794 GR															
19. ELEV. CASINGHEAD 6794															
20. TOTAL DEPTH, MD & TVD 2930		21. PLUG, BACK T.D., MD & TVD 2285		22. IF MULTIPLE COMPL., HOW MANY* single		23. INTERVALS DRILLED BY 0-2930		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2230-2260 Menefee							
25. WAS DIRECTIONAL SURVEY MADE Yes						26. TYPE ELECTRIC AND OTHER LOGS RUN IES, FDC-Gamma Ray - CCL & CBL									
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		24.0		101		12 1/4		70 sacks class "B" + 2% CaCl ₂ - circ		None					
4 1/2		9.5		2923		7 7/8		350 sacks Poz "A" 50-50 + 2% CaCl ₂		None					
29. LINER RECORD						30. TUBING RECORD									
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
none										2 3/8		2216		None	
31. PERFORATION RECORD (Interval, size and number) 2832-36, 2806-10 and 2794-2800, 0.4", 2 per foot 2304-2310, 0.4" 2 per foot 2232-36 and 2250-60, 0.4", 2 per foot CIBP at 2735 & 2285						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 2794-2836 0A 750 gallon 15% MCA 2304-2310 500 gallon 15% MCA 2232-36 & 2250-60 60 Frac 14000 Gal 1% KCL 30# ge mesh sand 6000# 100 mesh + 12000# 20-40 mesh sand									
33. PRODUCTION DATE FIRST PRODUCTION 8-27-76 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump DATE OF TEST 9-3-76 HOURS TESTED 24 CHOKE SIZE None PROD'N. FOR TEST PERIOD OIL—BBL. 32 GAS—MCF. TSTM WATER—BBL. 21 GAS-OIL RATIO TSTM FLOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE Pump 20 OIL—BBL. 32 GAS—MCF. TSTM WATER—BBL. 21 OIL GRAVITY-API (CORR.) 35.70						34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Fuel TEST WITNESSED BY Jack D. Cook									
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 Jack D. Cook TITLE Agent DATE 9-20-76									

*(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
None				Pictured Cliff LaVentana Chacra Cliff House Menefee Point Lookout	544 980 1332 1870 1934 2772	

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved
Budget Bureau No. 41-10355-6

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		5. LEASE DESIGNATION AND SURVEY NO. NM-7250																			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																			
2. NAME OF OPERATOR Basin Fuels, Inc.		7. UNIT AGREEMENT NAME																			
3. ADDRESS OF OPERATOR 300 West Arrington, Suite 300, Farmington, NM 87401		8. FARM OR LEASE NAME Easter Flats																			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990' FSL & 1850' FWL At top prod. interval reported below At total depth same		9. WELL NO. 2																			
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Wildcat																			
DATE ISSUED		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec 12 - 20N - 6W																			
15. DATE SPUDDED 1-7-77		12. COUNTY OR PARISH McKinley																			
16. DATE T.D. REACHED 1-14-77		13. STATE New Mexico																			
17. DATE COMPL. (Ready to prod.) N/A		18. ELEVATIONS (DF, RKB, ET, OR, ETC.)* 6764 GR																			
18. ELEVATIONS (DF, RKB, ET, OR, ETC.)* 6764		19. ELEV. CASINGHEAD 6764																			
20. TOTAL DEPTH, MD & TVD 2888		21. PLUG, BACK T.D., MD & TVD 2851																			
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY X																			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Menefee 1910 - 2717		25. WAS DIRECTIONAL SURVEY MADE Yes																			
26. TYPE ELECTRIC AND OTHER LOGS RUN IES - Density - Gamma Ray		27. WAS WELL CORRED No																			
28. CASING RECORD (Report all strings set in well)																					
<table border="1"><thead><tr><th>CASING SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>CEMENTING RECORD</th><th>AMOUNT PULLED</th></tr></thead><tbody><tr><td>8 5/8</td><td>20.0#</td><td>98</td><td>12 1/4"</td><td>90 sacks</td><td>none</td></tr><tr><td>4 1/2</td><td>9.5#</td><td>2885</td><td>7 7/8"</td><td>350 sacks</td><td>none</td></tr></tbody></table>				CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	8 5/8	20.0#	98	12 1/4"	90 sacks	none	4 1/2	9.5#	2885	7 7/8"	350 sacks	none
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED																
8 5/8	20.0#	98	12 1/4"	90 sacks	none																
4 1/2	9.5#	2885	7 7/8"	350 sacks	none																
29. LINER RECORD																					
<table border="1"><thead><tr><th>SIZE</th><th>TOP (MD)</th><th>BOTTOM (MD)</th><th>SACKS CEMENT*</th><th>SCREEN (MD)</th></tr></thead><tbody></tbody></table>				SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)													
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)																	
30. TUBING RECORD																					
<table border="1"><thead><tr><th>SIZE</th><th>DEPTH SET (MD)</th><th>PACKER SET (MD)</th></tr></thead><tbody></tbody></table>				SIZE	DEPTH SET (MD)	PACKER SET (MD)															
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31. PERFORATION RECORD (Interval, size and number)																					
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)																					
TEST WITNESSED BY																					
35. LIST OF ATTACHMENTS See Sundry Notice																					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																					
SIGNED <u>William T. Jones</u> TITLE <u>Agent</u> DATE <u>9-14-77</u> William T. Jones																					

*(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 23 and 24 above.)

31. 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.
			No cores or DST's

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TRUE VERT. DEPTH
La Venta	896	896
Chacra	1248	1248
Cliffhouse	1834	1834
Menefee	1910	1910
Point Lookout	2717	2717

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other In-
structions on
reverse side)Form approved,
Budget Bureau No. 10-11355-6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM-5979	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRUST NAME	
2. NAME OF OPERATOR Basin Fuels, Inc.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 300 W. Arrington, Suite 300, Farmington, NM 87401		8. FARM OR LEASE NAME Jay Jay	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2310' FSL & 330' FWL At top prod. interval reported below Same At total depth Same		9. WELL NO. 1	
14. PERMIT NO. ---		DATE ISSUED ---	
10. FIELD AND POOL, OR WILDCAT Franciscan Lake-Mesa Ver		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 18, T20N, R5W	
15. DATE SPUDDED 5-31-78		16. DATE T.D. REACHED 6-21-78	
17. DATE COMPL. (Ready to prod.) 7-23-78		18. ELEVATIONS (DF, REB, RT, OR, ETC.)* 6733 GR	
19. ELEV. CASINGHEAD 6733'		12. COUNTY OR PARISH McKinley	
20. TOTAL DEPTH, MD & TVD 2810'		13. STATE NM	
21. PLUG, BACK T.D., MD & TVD 2595'		23. INTERVALS DRILLED BY ROTARY TOOLS 0-2810 CABLE TOOLS None	
22. IF MULTIPLE COMPL., HOW MANY* ---		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2102 - 2134 Menefee	
25. TYPE ELECTRIC AND OTHER LOGS RUN IES, FDC - Caliper - GR. CCL & CBL		26. WAS DIRECTIONAL SURVEY MADE Yes	
27. WAS WELL CORRED No		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.)	
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

Jack D. Cook

TITLE

Agent

DATE

8-25-78

* (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. It is to be used in accordance with 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 are indicated in the instructions. It is to be used in accordance with 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 are indicated in the instructions. It is to be used in accordance with 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 are indicated in the instructions.

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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
				Cliffhouse	1504'	
				Menefee	1698'	
				Point Lookout	2640'	

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 5979	
2. NAME OF OPERATOR Basin Fuels		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 300 W Arrington, Suite 300, Farmington, NM 87401		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310' FSL & 330' FWL At top prod. interval: Same At total depth: Same		8. FARM OR LEASE NAME Jay Jay	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6733 GL		10. FIELD AND POOL, OR WILDCAT Franciscan Lake MV	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 18-20N-5W	
		12. COUNTY OR PARISH McKinley	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Spotted cement plugs as follows

30 cu.ft. Class "B" 2380' to 2595'
30 cu.ft. Class "B" 1535' to 1750'
30 cu.ft. Class "B" 0' to 200'

A dry hole marker was placed at the surface. Job complete August 21, 1984.

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE

DATE

Joe B. Burr, Jr.
(This space for Federal or State office use)

Partner

8/29/84

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ gas ☐
well well other

2. NAME OF OPERATOR

Basin Fuels, Ltd.

3. ADDRESS OF OPERATOR

300 W. Arrington, Suite 300, Farmington, NM

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 2310' FSL & 330' FWL

AT TOP PROD. INTERVAL: same

AT TOTAL DEPTH: same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☒

(other)

SUBSEQUENT REPORT OF:

RECEIVED

AUG 08 1984

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Operator proposes to plug and abandon the subject well as follows:

Spot 30 cubic feet cement plug from 2595' (p.b.t.d.) to 2380'
Spot 30 cubic feet cement plug from 1750' to 1535'
Spot 30 cubic feet cement plug from 200' to surface
Place a dry hole marker. Clean up location.

Subsurface Safety Valve: Manu. and Type

Set @ ft.

18. I hereby certify that the foregoing is true and correct

SIGNED

John Alexander
John Alexander

TITLE

Agent

DATE 12/8/83

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED
AS AMENDED

*See Instructions on Reverse Side

OPERATOR

AUG 14 1984
John Millerbach
John Millerbach
AREA MANAGER

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42 R0000

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 ☐ Re entry

2. NAME OF OPERATOR

Basin Fuels, Inc.

3. ADDRESS OF OPERATOR

152 Petroleum Center Bldg., Farmington, N.M. - 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660' FSL and 660' FEL

At top prod. interval reported below same

At total depth same

14. PERMIT NO.

DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

NM 7774

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

McCollum

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec 12, T20N, R6W

12. COUNTY OR PARISH

McKinley

13. STATE

New Mexico

15. DATE SPUDDED

1-8-76

16. DATE T.D. REACHED

1-11-76

17. DATE COMPL. (Ready to prod.)

2-29-76

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

6751 DF and 6745 GR

19. ELEV. CASINGHEAD

6745

20. TOTAL DEPTH, MD & TVD

2323

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

2210

22. IF MULTIPLE COMPL., HOW MANY*

single

23. INTERVALS DRILLED BY

→

ROTARY TOOLS

0-2323

CABLE TOOLS

none

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

2222-2254 Menefee and 2080 - 2098 Menefee

25. WAS DIRECTIONAL SURVEY MADE

yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

IES, Micrlog and CCL

27. WAS WELL CORRD

no

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
See original well file	same	same	same	same	none
- 4 1/2"	10-5	2321	7 7/8	375 sks Poz "A" + 5% Salt	none

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
none				

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 3/8	2149	none

31. PERFORATION RECORD (Interval, size and number)

2226-2232, 0.45 2 jets per foot
2238-2244, 0.45 2 jets per foot
2084-2092, 0.45 2 jets per foot
CIBP set at 2210 feet

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2084-2092	250 gallons 15% mud acid

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
2-29-76		Pump				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
3-5-76	24	none	→	11	9	0	818
LOW-TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
30	30	→	11	9	0	38.5	

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

Fuel and vent

TEST WITNESSED BY

Jack D. Cook

35. LIST OF ATTACHMENTS

None

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

SIGNED

TITLE Agent

DATE 4-16-76

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

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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 TOP	TRUE VERT. DEPTH
			No DST's or cores on re-entry - see original well report.	La Ventana Cha Cra Cliff House Menefee	1160 1245 1754 1830	same same same same

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on reverse side)

Form approved,
Budget 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 ☐

2. NAME OF OPERATOR

Basin Fuels Inc.

3. ADDRESS OF OPERATOR

300 W. Arrington; Suite 300; Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 330' FSL & 990' FEL

At top prod. interval reported below

At total depth

SAME

SAME

14. PERMIT NO. DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

NM 7774

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

McCollum

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Franciscian Lake Mesa Verde
OR AREA

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

S. 12-T20N-R6W

12. COUNTY OR PARISH

McKinley

18. STATE

NM

15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, RKB, RT, OR, ETC.)* 19. ELEV. CASINGHEAD

12-23-77

12-24-77

3-24-78

6743 RKB

6730

20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 25. WAS DIRECTIONAL SURVEY MADE

2717

2675

0-2717

2728-2739 Mesa Verde (Point Lookout)

YES

26. TYPE, ELECTRIC AND OTHER LOGS RUN

IES, FDC, G.R., Caliper, C.B.L., Correlation

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	20	96	12 1/4	30 sk. Class "B" + 2% CaCl ₂	NONE
4 1/2	9.5	2717	7 7/8	325 sk. Class "B" + 2% ge	NONE
				0.5% CFR-2	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
N/A				

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 3/8	2725	NONE

31. PERFORATION RECORD (Interval, size and number)

2728-31 0.4" i.d. 6 shots
2735-39 0.4" i.d. 8 shots

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2727-2745	Frac.w/26,000gal.gel water
	w/10,000lb. 40-60 & 30,000 lb.
	20-40 sand
2728-2739	Acidize w/500 gal. 15%

33. PRODUCTION

DATE FIRST PRODUCTION 3-26-78 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping-2 1/4" THEC pump WELL STATUS (Producing or shut-in) Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO.
4-1-78	24	N/A		34	35	155	4029
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
40	0		34	35	155	40.4	

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

Used as fuel

TEST WITNESSED BY

John Alexander

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

John Alexander

TITLE Agent

DATE 4-24-78

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

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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.

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Items 22 and 24: If this well is completed for depth measurements given in other spaces on this form and in any attachments, 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.)

FORMATION	TOP	BOTTOM
SHOW 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		

[illegible][illegible]

Menefee	1810
Point Lookout	2720
2WNE	2720
2WNE	1810

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved,
Budget Bureau No. 47-1335-5.

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 ☐				
2. NAME OF OPERATOR						5. LEASE DESIGNATION AND SERIAL NO.					
BASIN FUELS, LTD.						NM 7774					
8. ADDRESS OF OPERATOR						6. IF INDIAN, ALLOTTEE OR TRIBE NAME					
300 W. Arrington, Suite 300, Farmington, New Mexico 87401						7. UNIT AGREEMENT NAME					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						8. FARM OR LEASE NAME					
At surface 330°/S, and 1650°/E						MCCOLLUM					
At top prod. interval reported below same						9. WELL NO.					
At total depth same						3					
14. PERMIT NO.						10. FIELD AND POOL, OR WILDCAT					
DATE ISSUED						FRANCISCAN LAKE-MESA VERI					
12. COUNTY OR PARISH						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA					
McKinley						Sec. 12-20N, 6W					
13. STATE						12. COUNTY OR PARISH					
New Mexico						McKinley					
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*		19. ELEV. CASINGHEAD			
9/14/78		9/25/78		10/26/78		6726 GL		6727			
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS			
2725'		2725				→		0-2700			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*								25. WAS DIRECTIONAL SURVEY MADE			
2304-2725 Mesa Verde								Yes			
26. TYPE ELECTRIC AND OTHER LOGS RUN								27. WAS WELL CORED			
IES, FDC, GR, CCL								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		20		90'		12 1/4		100 sk. class "B" & 2% CaCl ₂		NONE	
4 1/2		9.5		2700		6 1/4		225 sk. class "B" & 2% Gel and 1% CFR-2		NONE	
29. LINER RECORD										30. TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE	
N/A										2 3/8	
										2695	
										NONE	
31. PERFORATION RECORD (Interval, size and number)										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2304'-2307 0.4" id 6 shots										DEPTH INTERVAL (MD)	
2700-2725 Open hole										2700-2725	
										2304-2307	
										AMOUNT AND KIND OF MATERIAL USED	
										Frac w/ 17,000 gal. gelled oil & 16,000 lb. 20-40 sand	
										Frac w/ 10,000 gal. gelled wat & 13,500 lb. 20-40 sand	
33.* PRODUCTION											
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)						WELL STATUS (Producing or shut-in)			
10/05/78		PUMPING						PRODUCING			
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.	
05/15/79		24		N/A		→		23		30	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.	
				→		23		30		5	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)										TEST WITNESSED BY	
VENTED										Ramon Sandoval	
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

JOHN ALEXANDER

TITLE

AGENT

DATE 06/14/79

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

INSTRUCTIONS

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Item 22: If the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formations 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 33.

Item 24: 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 25: 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.

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38. 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
				MENEFEE POINT LOOKOUT	2570 2700	2570 2700

2750
2740
SEP 29 1977
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUP "DATE"

other in-
structions on
reverse side)Form approved,
Budget Bureau No. 42-B-55

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. N00-C-14-20-4402	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Basin Fuels, Inc.		7. UNIT AGREEMENT NAME	
8. ADDRESS OF OPERATOR Suite 300, 300 West Arrington, Farmington, NM 87401		8. FARM OR LEASE NAME N00-Navajo	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 340' FNL & 350' FEL At top prod. interval reported below At total depth same		9. WELL NO. 1	
14. PERMIT NO. same		10. FIELD AND POOL, OR WILDCAT Franciscan Lake Mesa Verde	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec 13 - 20N - 6W	
12. COUNTY OR PARISH McKinley		13. STATE New Mexico	
15. DATE SPUDDED 8-23-77	16. DATE T.D. REACHED 9-1-77	17. DATE COMPL. (Ready to prod.) 9-24-77	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6729 GL
19. ELEV. CASINGHEAD 6729	20. TOTAL DEPTH, MD & TVD 2830		
21. PLUG, BACK T.D., MD & TVD 2750	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY →	24. ROTARY TOOLS X
25. CABLE TOOLS			26. WAS DIRECTIONAL SURVEY MADE Yes
27. TYPE ELECTRIC AND OTHER LOGS RUN IES, FDC, GR-Caliper			28. WAS WELL CORED NO
29. CASING RECORD (Report all strings set in well)			
CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
7 5/8	20	92'	9 7/8
4 1/2	10.5	2816	6 1/4
CEMENTING RECORD		AMOUNT FULLED	
70 sacks		none	
150 sacks		none	
30. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
none			
31. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 3/8	2686	none	
32. PERFORATION RECORD (Interval, size and number)			
2762-68	.35"	12	
2730-35	.35"	10	
2723-27	.35"	8	
33. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
2723-2735		750 gallons 15%	
		15,000 gallon gelled water	
		6,000# 40-60 and 16,000# 20-4	
34. PRODUCTION			
DATE FIRST PRODUCTION 9-25-77		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) pumping	
WELL STATUS (Producing or shut-in) producing			
DATE OF TEST 9-27-77	HOURS TESTED 24	CHOKE SIZE -	PROD'N. FOR TEST PERIOD →
OIL—BBL. 140	GAS—MCF. 15	WATER—BBL. 28	GAS-OIL RATIO 107
FLOW. TUBING PRESS. 25	CASING PRESSURE 25	CALCULATED 24-HOUR RATE →	OIL—BBL. 140
GAS—MCF. 140	WATER—BBL. 28	OIL GRAVITY-API (CORR.) 40.4	
35. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Used for fuel			
36. TEST WITNESSED BY Max Webb			
37. LIST OF ATTACHMENTS See Sundry Notice			
38. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <u>William T. Jones</u> William T. Jones		TITLE Agent	
DATE 9-28-77			

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

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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.
			No cors or DST's

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Cliffhouse	1675	1675
Menefee	1810	1810
Point Lookout	2722	2722

NOV 10 1978

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved
Budget Bureau No. 01-2355.5.

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 ☐
2. NAME OF OPERATOR Basin Fuels, Ltd.						5. LEASE DESIGNATION AND SERIAL NO. Noo-C-14-20-4402	
3. ADDRESS OF OPERATOR 300 W. Arrington, Suite 300, Farmington, New Mex. 87401						6. IF INDIAN, ALLOTTEE OR TRIBAL NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' FNL & 1650' FEL At top prod. interval reported below Same At total depth Same						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						8. FARM OR LEASE NAME Noo Navajo	
DATE ISSUED						9. WELL NO. 3	
15. DATE SPUDDED 9-29-78						10. FIELD AND POOL, OR WILDCAT Franciscan Lake M.V.	
16. DATE T.D. REACHED 10-9-78						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 13-20N-6W	
17. DATE COMPL. (Ready to prod.) 10-13-78						12. COUNTY OR PARISH McKinley	
18. ELEVATIONS (OF REB, RT, OR, ETC.)* 6715 9.6						13. STATE NM	
19. ELEV. CASINGHEAD 6716'						20. TOTAL DEPTH, MD & TVD 2800	
21. PLUG, BACK T.D., MD & TVD 2762						22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY 10-2800						24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2709-2717 Mesa Verde	
25. WAS DIRECTIONAL SURVEY MADE Yes						26. TYPE ELECTRIC AND OTHER LOGS RUN IES, FDC, GR, CCL	
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	20	100	12 1/4	100 SK CL.B 2% C CL ₂			None
4 1/2	10.5	2800	7 7/8	250 65-35 POZ + 12% Gel			None
				75 CL.B + 0.5% CFR-2,			
				0.9# Latex/sk.			
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
N/A					2 3/8	2701	
31. PERFORATION RECORD (Interval, size and number) 2709-2717 0.4" id 16 shots				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
				2709-2717		500 gal. 15% HCL, NE Acid	
						15000 gal. gel 2% KCC Water,	
						6000 #100 Mesh and 10,000	
						#20-40 sand	
33. PRODUCTION							
DATE FIRST PRODUCTION 10-13-78		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Shut in	
DATE OF TEST 10-17-78	HOURS TESTED 24	CHOKE SIZE 12/64"	PROD'N. FOR TEST PERIOD →	OIL—BSL. 96	GAS—MCF. 115	WATER—BSL. 2	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BSL. 96	GAS—MCF. 115	WATER—BSL. 2	OIL GRAVITY-API (CORR.) 40.4	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented						TEST WITNESSED BY John Alexander	
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 John Alexander		TITLE Agent		DATE 11-6-78			

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

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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	TRUE VERT. DEPTH
				Menefee	1780	Same
				Point lookout	2724	Same

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved,
Budget Bureau No. 10-1000-5.

5. LEASE DESIGNATION AND SERIAL NO.

NOO-C-14-20-4400

6. IF INDIAN, ALLOTTEE OR TRUST NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

NOO NAVAJO

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

FRANCISCAN LAKE- MV

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

SEC. 13-20N-6W

12. COUNTY OR PARISH

McKINLEY

13. STATE

NEW MEXICO

19. ELEV. CASINGHEAD

6714

23. INTERVALS DRILLED BY

0-2805

25. WAS DIRECTIONAL SURVEY MADE

YES

27. WAS WELL CORED

NO

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 _____

2. NAME OF OPERATOR

BASIN FUELS, LTD.

3. ADDRESS OF OPERATOR

300 W. Arrington, Suite 300, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 1650/N, 990'/E

At top prod. interval reported below SAME

At total depth SAME

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

12/28/78

16. DATE T.D. REACHED

01/04/79

17. DATE COMPL. (Ready to prod.)

04/13/79

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

6713 GL

20. TOTAL DEPTH, MD & TVD

2805

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

2751

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

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

2721-2729 Point Lookout

26. TYPE ELECTRIC AND OTHER LOGS RUN

IES, FDC-CNL, GR, CBL, CORRELATION

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	32	85	12 1/4	80 sk class B + 2% CaCl ₂	NONE
4 1/2	9.5	2805	6 1/4	100 sk 65-35 Poz + 12% gel, 150 C/B 2/ 0.5% CFR-2	NONE

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
N/A				

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 3/8	2707	N/A

31. PERFORATION RECORD (Interval, size and number)

2721'-2729' 0.4" 16 shots

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2721-2729	500 gal. 15% HCl- Fractured
	2/ 13,000 gal 2% KCl water 2/
	6000 lb. 100 mesh and 12,000
	lb. 20-40 sand

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
04/10/79		FLOWING				SHUT IN	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
04/13/79	24	3/4"	→	138	62	115	450
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
100	250	→	138	62	115		

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

VENTED

TEST WITNESSED BY

JOHN ALEXANDER

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

John Alexander
JOHN ALEXANDER

TITLE

AGENT

DATE

May 11, 1979

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved
Budget Bureau No. 42 R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

5. LEASE DESIGNATION AND SERIAL NO.

N00-C-14-20-4403

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Noo Navajo

9. WELL NO.

5X

10. FIELD AND POOL, OR WILDCAT

Franciscan Lake - Mesa Ve

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

Sec. 13, T20N, R6W

12. COUNTY OR PARISH

McKinley

13. STATE

NM

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 _____

2. NAME OF OPERATOR

Basin Fuels, Ltd.

3. ADDRESS OF OPERATOR

300 W. Arrington, Suite 300, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 2320' FSL & 1650' FEL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUNDED

1/25/79

16. DATE T.D. REACHED

2/1/79

17. DATE COMPL. (Ready to prod.)

P & A 2-2-79

18. ELEVATIONS (DF, REB, RT, OR, ETC.)*

6704 Ground

19. ELEV. CASINGHEAD

None

20. TOTAL DEPTH, MD & TVD

2765'

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

P & A

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

→

ROTARY TOOLS

0-2765

CABLE TOOLS

None

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

P & A

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

IES, compensated density, gamma ray, caliper

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"	24.0	68'	12 1/4"	60 sacks Class "B" + 2% CaCl ₂	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
None				

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

P & A

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

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	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.		CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

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

TEST WITNESSED BY

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

Jack D. Cook

TITLE

Agent

DATE

2-5-79

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

NOTE: Refer to Sundry notice for plugging information.

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 TOP TRUE VERT. DEPTH
	NONE			Pictured Cliff Cliffhouse Menefee Point Lookout	430' 1625' 1756' 2722' --

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R1424

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ gas ☐ other ☐
2. NAME OF OPERATOR
Basin Fuels, Ltd.
3. ADDRESS OF OPERATOR
300 W. Arrington, Suite 300, Farmington, NM
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2310' FSL & 1650' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF ☐	☐
FRACTURE TREAT ☐	☐
SHOOT OR ACIDIZE ☐	☐
REPAIR WELL ☐	☐
PULL OR ALTER CASING ☐	☐
MULTIPLE COMPLETE ☐	☐
CHANGE ZONES ☐	☐
ABANDON* ☐	☒
(other) ☐	☐

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well was junked, plugged and abandoned as follows:
Plug #1 2050' - 2445' 100 sks Class "B"
Plug #2 315' - 515' 60 sks Class "B"
Plug #3 40' - 140' 30 sks Class "B"
Plug #4 0 - 30' 10 sks Class "B"

Well P & A 9:00 PM 1-24-79. Install dry hole marker skin to drill replacement well.

Subsurface Safety Valve: Manu. and Type _____

18. I hereby certify that the foregoing is true and correct

SIGNED Jack D. Cook TITLE Agent DATE 12/29/79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

5. LEASE Noo-C-14-20-4403	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Noo Navajo	
9. WELL NO. 5	
10. FIELD OR WILDCAT NAME Franciscan Lake Mesa Verde	
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA Sec 13, T20N, R6W	
12. COUNTY OR PARISH McKinley	13. STATE NM
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 6704 GR	

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 47-1000-6

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 ☐

2. NAME OF OPERATOR

Joel B. Burr, Jr.

3. ADDRESS OF OPERATOR

300 W. Arrington, Suite 300, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

990' FNL & 2310' FWL

At top prod. interval reported below

Same

At total depth

Same

14. PERMIT NO.

DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

NM-15646

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Robinson Coleman

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Franciscian Lake M.V.

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

Sec 13, T20N, R6W

12. COUNTY OR PARISH

McKinley

13. STATE

New Mexico

15. DATE SPUDDED

12-27-77

16. DATE T.D. REACHED

12-29-77

17. DATE COMPLE. (Ready to prod.)

2-24-78

18. ELEVATIONS (DF, RES, RT, OR, ETC.)*

6730 GL

19. ELEV. CASINGHEAD

6730

20. TOTAL DEPTH, MD & TVD

2845

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

2364

22. IF MULTIPLE COMPLE., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

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

1820 to 2740 Menefee

25. WAS DIRECTIONAL SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Induction Electric, Gamma Ray Density, Gamma Ray CBL

27. WAS WELL CORRED

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	100'	12 1/4	75 Class "B" Plus 2% CaCl ₂	None
4 1/2	10.5	2440'	7 7/8	175 Sxs 65-35 Poz Mix plus 12% gel	None

29. LINER RECORD

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

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 3/8	2344	None

31. PERFORATION RECORD (Interval, size and number)

2369-2370	.35	4
2346-54	.35	16

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2369-2370	Squeezed with 75 sacks

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
4-4-78		pumping				Producing	
DATE OF TEST	HOURS TESTED	CHOKES SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4-11-78	24	2"	→	20	TSTM	123	TSTM
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
25	25	→	20	TSTM	123	40.4	

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

Fuel

TEST WITNESSED BY

Bob Johnson

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

William T. Jones

TITLE

Agent

DATE

4-18-78

*(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.), formations 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

FORMATION TOP BOTTOM DESCRIPTION, CONTENTS, ETC.

No Cores or DST's

38. GEOLOGIC MARKERS

NAME

TOP

MEAS. DEPTH

FEET/FEET DEPTH

Cliffhouse
Menefee
Point Lookout

1670
1820
2740

1670
1820
2740

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved,
Budget 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 _____
2. NAME OF OPERATOR JOEL B. BURR, JR.						5. LEASE DESIGNATION AND REPT. NO. NM 15646	
3. ADDRESS OF OPERATOR Suite 300, 300 W. Arrington, Farmington, N.M. 87401						6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330' FNL 2310' FWL At top prod. interval reported below Same At total depth Same						7. UNIT AGREEMENT NAME N/A	
14. PERMIT NO. _____ DATE ISSUED _____						8. FARM OR LEASE NAME Robinson/Coleman	
15. DATE SPUDDED 6/24/78						9. WELL NO. 2	
16. DATE T.D. REACHED 7/2/78						10. FIELD AND POOL, OR WILDCAT Franciscan Lake MV	
17. DATE COMPL. (Ready to prod.) 9/1/78						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 13, T20N, R6W	
18. ELEVATIONS (DF, RKB, RT, OR, ETC.)* 6758						12. COUNTY OR PARISH McKinley	
19. ELEV. CASINGHEAD 6758						13. STATE N.M.	
20. TOTAL DEPTH, MD & TVD 2826		21. PLUG, BACK T.D., MD & TVD 2475		22. IF MULTIPLE COMPL., HOW MANY* →		23. INTERVALS DRILLED BY ROTARY TOOLS X CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1815 - 2730 MENEFFEE						25. WAS DIRECTIONAL SURVEY MADE YES	
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction, Compensated Density, Gamma Ray CBL						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	85'	12-1/4	80 sks. Cl "B" w/2%		CC	
5-1/2	15-1/2	2488	7-7/8	100 sks. 65/35 6% and			
				225 sks. Cl "B" Neat			
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
NONE					2-7/8	2340'	NONE
31. PERFORATION RECORD (Interval, size and number) 2330 - 2334 .35 16				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
				2330-34		16,000# 20/40	
33. PRODUCTION							
DATE FIRST PRODUCTION 9/1/78		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 9/2/78	HOURS TESTED 24	CHOKE SIZE 2"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 112	GAS—MCF. 12	WATER—BBL. 155	GAS-OIL RATIO 12
FLOW. TUBING PRESS. 25	CASING PRESSURE 25	CALCULATED 24-HOUR RATE →	OIL—BBL. 112	GAS—MCF. 12	WATER—BBL. 155	OIL GRAVITY-API (CORR.) 40.4	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) FUEL						TEST WITNESSED BY RAY SANDOVAL	
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 R.D. Simmons		TITLE AGENT			DATE 9/2/78		

*(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, 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 land or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

Item 1: 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 33.

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 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.)

2. 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.
			No Cores or DST's
38. GEOLOGIC MARKERS			
NAME		TOP	
		MEAS. DEPTH	TRUE VERT. DEPTH
CLIFFHOUSE		1650	1650
MENEFFEE		1815	1815
POINT LOOKOUT		2730	2730

RECEIVED DEC 6 1990

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐
2. NAME OF OPERATOR
GEORGE E. COLEMAN
3. ADDRESS OF OPERATOR
Suite 300, 300 W. Arrington, Farmington, NM
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990' FWL and 660' FNL
AT TOP PROD. INTERVAL: SAME
AT TOTAL DEPTH: SAME

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☒
(other) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE
NM 15646
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
ROBINSON-COLEMAN
9. WELL NO.
3
10. FIELD OR WILDCAT NAME
FRANCISCAN LAKE MESA VERDE
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 13, T20N, R6W
12. COUNTY OR PARISH
McKINLEY
13. STATE
NEW MEXICO
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6780 Ground

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Refer to previous Sundry Notices for well data. Tested well and found same to be non-commercial. Propose to plug and abandon as follows:

PLUG NO.

- | | |
|---|--|
| 1 | 15 sacks class "B" cement 1800-2000'. Shoot off csg @ approx. 1400'. |
| 2 | 50' in and 50' out, 4 1/2" csg. stub. 30 sacks class "B" cement. |
| 3 | 60 sacks class "B", 400-600 ft. |
| 4 | 30 sacks class "B", 0-75 ft. |

Install dry hole marker. Pits will be filled as soon as practical. Location to be restored to BLM specification.

Subsurface Safety Valve: Manu. and Type _____

18. I hereby certify that the foregoing is true and correct

SIGNED

JACK D. COOK

TITLE

AGENT

DATE

April 18, 1979

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY

APPROVED

APR 23 1979

E. A. SCHMIDT

ACTING DISTRICT ENGINEER

TITLE

DATE

DURANGO OFFICE COPY

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42 R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ D & A		5. LEASE DESIGNATION AND SERIAL NO. NM 15646	
2. NAME OF OPERATOR George E. Coleman		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Drawer 3337 Farmington, New Mexico 87401		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310'FNL, 2310'FWL		8. FARM OR LEASE NAME Robinson-Coleman	
14. PERMIT NO.		9. WELL NO. 4	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6722 Gr.		10. FIELD AND POOL, OR WILDCAT Franciscan Lake KMV	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13, T20N, R6W	
		12. COUNTY OR PARISH McKinley	13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

TD 2830, PB 2790, Dry & Abandon.

No casing pulled.

Set 200' cement plug 2600 to PB 2790.

Place 5 sacks cement in 5½ casing stub.

Place 3 sacks cement in annulus.

Install 4 x 4 dry hole marker.

Clean location and back-fill pits.

Will re-seed as soon as possible,

Job complete 6-16-1979.

APPROVED
AS AMENDED

OCT 29 1984

J. M. MILLER
AREA MANAGER

18. I hereby certify that the foregoing is true and correct.

SIGNED

TITLE Agent

DATE

6-25-1979

(This space for Federal or State office use)

TITLE

DATE

Approved as to plugging of the well bore.
Liability under bond is retained until surface restoration is completed.

See Instructions on Reverse Side

DURANGO OFFICE COPY

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on reverse side)

Form approved.
Budget Bureau No. 47 BASS-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 _____

2. NAME OF OPERATOR
Basin Fuels, Inc.

3. ADDRESS OF OPERATOR
152 Petroleum Center Bldg., Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660' FNL & 660' FWL

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO. DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

NM-7509

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Scooter

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Extension-Unnamed

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

Sec. 18, T20N, R5W

12. COUNTY OR PARISH
McKinley

13. STATE
New Mexico

15. DATE SPUDDED 6-15-75 16. DATE T.D. REACHED 6-27-75 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6741 RKB & 6729 GR 19. ELEV. CASINGHEAD 6729

20. TOTAL DEPTH, MD & TVD 2860 21. PLUG, BACK T.D., MD & TVD 2780 22. IF MULTIPLE COMPL., HOW MANY* None 23. INTERVALS DRILLED BY 28. INTERVALS DRILLED BY 0-2860 29. ROTARY TOOLS 30. CABLE TOOLS None

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 25. WAS DIRECTIONAL SURVEY MADE

2690 - 2770 Point Lookout

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN 27. WAS WELL CORED

IES, Density, Sonic, Correlation Collar & Cement Bond

No

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

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8	24.0	100	12 1/4	70 sks. Class "A" + 2% CaCl ₂	None
4-1/2	10.5	2858	7-7/8	400 sks. Poz. "A" 50-50% with 2% gel & 6% salt.	None

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					2-3/8	2773	None

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

2795-98, 0.4, 2 jets/ft. SET
2762-69, 0.4", 2 jets/ft. CIBP
2726-30, 0.4", 2 jets/ft.
2692-99, 0.4", 2 jets/ft.
2106-2112, 0.4", 2 jets/ft.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2795-98	250 gal., 15% MCA
2726-30	250 gal., 15% MCA
2692-99	500 gal., 15% MCA
Frac. w/15,000 gal. oil & 15,000 # Sand.	

33. CIBP @ 2780 PRODUCTION

DATE FIRST PRODUCTION 9-24-75 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump WELL STATUS (Producing or shut-in) Producing

DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
9-24-75	24	None	→	16	26	22	1625
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
40	40	→	16	26	22	35.6	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) 35. TEST WITNESSED BY

Fuel & Vent.

Jack Cook

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 Jack D. Cook TITLE Agent DATE 10-09-75

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

INSTRUCTIONS

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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.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
	10	10		Cliffhouse	1675	1675
	10	10		Menefee	1810	1810
	10	10		Point Lookout	2723	2723

1500 D. COOK

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See In-
struction
on
reverse side)Form approved,
Budget Bureau No. 12-R-5555

5. LEASE DESIGNATION AND SERIAL NO.

NM-0555841

6. IF INDIAN, ALLOTTEE OR THIRE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Slick

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 7, T20N, R5W

12. COUNTY OR
PARISH

McKinley

13. STATE

N. Mexico

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. RESRV. ☐ Other _____

2. NAME OF OPERATOR

Basin Fuels, Inc.

3. ADDRESS OF OPERATOR

152 Pat. Center Bldg., Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660' FSL & 1980' FEL

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO. DATE ISSUED

15. DATE SPUNDED 6-10-75 16. DATE T.D. REACHED 6-21-75 17. DATE COMPL. (Ready to prod.) 6-29-75 18. ELEVATIONS (OF RKB, RT, OR, ETC.)* 6742 GR 19. ELEV. CASINGHEAD 6742

20. TOTAL DEPTH, MD & TVD 2815 21. PLUG, BACK T.D., MD & TVD 2781 22. IF MULTIPLE COMPL., HOW MANY? N/A 23. INTERVALS DRILLED BY ROTARY TOOLS 0-2815 CABLE TOOLS None

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2746-2781 Point Lookout 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN IES, Density, Correlation Collar & Cement Bond 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	24.0	94	12 1/4	60 sks. Class "A"	None
4 1/2	10.5	2815	7-7/8	350 sks. Poz. "A" 50-50 w/2% gel. & 5% Salt	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8	2716	None

31. PERFORATION RECORD (Interval, size and number)

2752-55; 0 1/4"; 2 shots/ft.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2752-55	250 gal. 15% MCA Frac w/5,000 gal. H ₂ O & 5,000 # 20-40 sd.

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
6-29-75		PUMP					Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
7-2-75	24	PUMP	→	25	27	1	1030	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24 HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
PUMP	10	→	25	27	1	39.5		

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

Fuel & Vent

TEST WITNESSED BY

J. Cook

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

Jack D. Cook

TITLE

Agent

DATE 7-15-75

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

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Item 29: "Nagay-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.)

JUL 21 1975

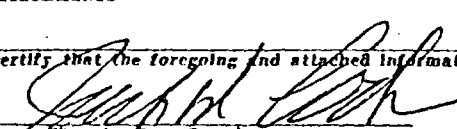
37. SUMMARY OF POKO'S ZONES:				38. GEOLOGIC MARKERS			
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORRELATION INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES							
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP		
					MEAS. DEPTH	TRUE VERT. DEPTH	
				Cliff House	1714	1714	
				Menefee	1800	1800	
				Point Lookout	2746	2746	

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other In-
structions on
reverse side)Form approved.
Budget Bureau No. 42 B355.5

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 _____
2. NAME OF OPERATOR						Basin Fuels, Inc.	
3. ADDRESS OF OPERATOR						152 Petroleum Center Bldg., Farmington, NM 87401	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						At surface 2310' FNL & 2260' FEL	
At top prod. interval reported below						Same	
At total depth						Same	
14. PERMIT NO.		DATE ISSUED		12. COUNTY OR PARISH		18. STATE	
6769 GR & 6781 KB		5-28-76		McKinley		New Mexico	
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, REB, RT, OR, ETC.)*	
5-28-76		6-11-76		8-26-76		6769 GR & 6781 KB	
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY	
3010		2874		None		0-3010	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						25. WAS DIRECTIONAL SURVEY MADE	
2814-2842 Point Lookout						Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN						27. WAS WELL CORED	
IES, Caliper-FDC-GR, CCL & CBL						No	
29. CASING RECORD (Report all strings set in well)						30. TUBING RECORD	
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 5/8"		24.0		101'		12 1/4"	
4 1/2"		9.5		2964		7 7/8"	
CEMENTING RECORD		AMOUNT PULLED		CEMENTING RECORD		AMOUNT PULLED	
70 sacks class "B" + 2% CaCl ₂ circulated		None		350 sacks Poz "A" 50-50 + 2% CaCl ₂		None	
29. LINER RECORD		30. TUBING RECORD		29. LINER RECORD		30. TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
None							
SIZE		DEPTH SET (MD)		PACKER SET (MD)		SIZE	
2 3/8		2795		None		2 3/8	
31. PERFORATION RECORD (Interval, size and number)						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2816-2823, 0.4", 2 per foot						DEPTH INTERVAL (MD)	
2828-2836, 0.4", 2 per foot						2816-2836 OA	
						2816-2836 OA	
						AMOUNT AND KIND OF MATERIAL USED	
						500 gallon 15% Acid	
						14000 gallon 2% KCL water	
						containing 30# per 1000 WG-6	
						6000# 100 mesh sand + 12000#	
33. PRODUCTION						20-40 mesh sand	
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
9-3-76		Pump				Producing	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
9-8-76		24		None		OIL—BSL. 29	
FLOW, TUBING PRESS.		CASINO PRESSURE		CALCULATED 24-HOUR RATE		GAS—MCF. TSTM	
None		20 psi		29		WATER—BSL. 411	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						OIL GRAVITY-API (CORR.)	
Fuel						41.70	
35. LIST OF ATTACHMENTS						TEST WITNESSED BY	
						Jack D. Cook	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records						DATE	
SIGNED  Jack D. Cook						9-28-76	
TITLE Agent							

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

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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; COBED 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.
			No DST's

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliff	514	
LaVentana	1065	
Chacra	1305	
Cliff House	1856	
Menefee	1922	
Point Lookout	2740	

RECEIVED

6-6-75

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget 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 _____

2. NAME OF OPERATOR

BASIN FUEL, INC.

3. ADDRESS OF OPERATOR

152 Petroleum Center, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660 FSL 660 FWL

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO. DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

NM 0555838-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Star

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec 7-20N-5W

12. COUNTY OR PARISH

McKinley

13. STATE

New Mexico

15. DATE SPUNDED 3-24-75 16. DATE T.D. REACHED 3-30-74 17. DATE COMPL. (Ready to prod.) 5-17-75 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 19. ELEV. CASINGHEAD 6733

20. TOTAL DEPTH, MD & TVD 2885 21. PLUG, BACK T.D., MD & TVD 2180 22. IF MULTIPLE COMPL., HOW MANY* - 23. INTERVALS DRILLED BY - ROTARY TOOLS X CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1980-2120 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Induction Electric & Formation Density with Gamma Ray Caliber

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 FULLED
8 5/8	24.0	95	12 1/4	65 sacks Class A	
4 1/2	10.5#	2883	7 7/8	400 sacks POA & 6% salt	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					2 3/8"	2157	

31. PERFORATION RECORD (Interval, size and number)

1980 - 86 0.4" 12 holes
2055 - 65 0.4" 20 holes
2114 - 20 0.4" 12 holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1980 - 86	500 gal. acid
2055 - 65	None
2114 - 20	None

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
5-15-75		Pumping 2 x 1½ x 16 insert					Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
5-24-75	24		→	15	53	21	3533	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
40	40	→	15	53	2	35.7		

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

Vented

TEST WITNESSED BY

Jack D. Cook

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

TITLE

President

DATE

Engineering & Production Service, Inc.

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

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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 FORMER ZONES:			38. GEOLOGIC MARKERS		
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS INCLUDING DEPTH INTERVAL TESTED, CEMENTION (SEE TIME TOOL OPEN, PLACING AND SHUT-IN PRESSURES, AND RECOVERIES			NAME		
FORMATION	TOP	BOTTOM	MEAS. DEPTH		TELEVERT. DEPTH
No Cores			Pictured Cliff		470
No DST'S			Cliff House		1890
			Menefee		1910
			Point Lookout		2740

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐

2. NAME OF OPERATOR
BASIN FUELS, LTD.

3. ADDRESS OF OPERATOR 87401
Suite 300, 300 W. Arrington, Farmington, NM

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL and 2310' FEL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☒

5. LEASE
NM 8896

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
STEPPIN OUT

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
FRANCISCAN LAKE- MESA VERDE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 18, T20N, R5W

12. COUNTY OR PARISH
McKinley

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6746 Ground

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Drill 6 3/4" hole to TD 2780'. Open hole logs and mud logger indicate well to be non-commercial. Plugged and abandoned well as follows:

Plug #1	30 sacks class "B" cement	2655-2755'
Plug #2	30 sacks class "B" cement	1550-1650'
Plug #3	30 sacks class "B" cement	345- 445'
Plug #4	35 sacks class "B" cement	0- 75'

Well Plugged and abandoned 5:30 PM, 04/23/79. Install dry hole marker. Fenced pits. Will restore location to BIA and USGS specifications as soon as practical.

Subsurface Safety Valve: Manu. and Type

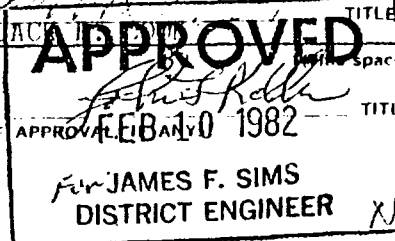
Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED

AGENT

DATE April 25, 1979

APPROVED BY
CONDITIONS OF

TITLE

DATE

*See Instructions on Reverse Side



UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ gas ☐ other ☐
2. NAME OF OPERATOR
Basin Fuels, Ltd.
3. ADDRESS OF OPERATOR 300 W. Arrington, Suite 300
Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1900' FNL and 1980' FWL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF ☐ ☐
FRACTURE TREAT ☐ ☐
SHOOT OR ACIDIZE ☐ ☐
REPAIR WELL ☐ ☐
PULL OR ALTER CASING ☐ ☐
MULTIPLE COMPLETE ☐ ☐
CHANGE ZONES ☐ ☐
ABANDON* ☐ ☐
(other) Change name of well

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Change name of well and number from Easter Flats #4 to St
C-104 attached.

APPROVED

OCT 31 1979

CARL A. BARRICK

ACTING DISTRICT ENGINEER

Subsurface Safety Valve: Manu. and Type

18. I hereby certify that the foregoing is true and correct

SIGNED JACK D. COOK TITLE Agent

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE DATE

APPROVED

*See Instructions on Reverse Side

5. LEASE 0555838A	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Star	
9. WELL NO. 2	
10. FIELD OR WILDCAT NAME Franciscan Lake Mesa Verde	
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA Sec 7, T20N, R5W	
12. COUNTY OR PARISH McKinley	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DE KDB, AND WD) 6772 GR	

(NOTE: Report results of multiple completion or zone change on Form 9-331-C.)

OCT 22 1979

APPROVED
OCT 19 1979

INSTRUCTIONS

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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.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
				Pictured Cliffs	575 feet		
				Chacra	1280 feet		
				Cliffhouse	1850 feet		
				Menefee	1930 feet		
				Point Lookout	2826 feet		

38. GEOLOGIC MARKERS

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42 E3555.

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 ☐

2. NAME OF OPERATOR

Basin Fuels, Ltd.

3. ADDRESS OF OPERATOR

300 W. Arrington, Suite 300, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660' FSL & 330' FWL

At top prod. interval reported below same

At total depth same

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

18. STATE

McKinley

New Mexico

15. DATE SPUNDED 3-18-80 16. DATE T.D. REACHED 3-24-80 17. DATE COMPL. (Ready to prod.) 5-17-80 18. ELEVATIONS (DP, RKB, RT, GR, ETC.)* 6730 GR and 6734 KB 19. ELEV. CASINGHEAD 6730

20. TOTAL DEPTH, MD & TVD 3001 21. PLUG, BACK T.D., MD & TVD 2808 22. IF MULTIPLE COMPL., HOW MANY* Single 23. INTERVALS DRILLED BY 0-3001 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2090 - 2340 Menefee 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Induction - Density - Neutron

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	24.0	90'	12 1/4	75 sks Class "B" + 2% CaCl ₂ cir.	2 none
4 1/2	10.5	2848	6 1/4	225 sks Class "B" + 0.5% D-65 + 2% CaCl ₂	none

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					2 3/8	2360	None

31. PERFORATION RECORD (Interval, size and number)

2323 - 2328, 0.45", 10
2091 - 2105, 0.45", 28

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2323-2328	500 gal 15% HCl
2091-2105	750 gal 15% HCl
2091-2105	14,000 gal gelled H ₂ O, 4000# 100 mesh & 15,000# 20-40 mesh

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
5-17-80		Pump (2 1/2" x 2 1/4" x 14')				producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
5-22-80	24	none	→	66	26	228	394
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
0	25	→	66	26	228	37.8	

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

Vented

TEST WITNESSED BY

R. Sandoval

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

Jack D. Cook

TITLE

Agent

DATE June 19, 1980

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

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27. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORREL 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.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
					Mancos	2900'	
					Point Lookout	2766'	
					Cliff House	1662'	
					Lewis	1644'	
					Pictured Cliff	440'	

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other In-
structions on
reverse side)Form approved
Budget Bureau No. 42 H355.6

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

6. LEASE DESIGNATION AND SERIAL NO.

NM 0555838A

8. IF INDIAN, ALAMITE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Star

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Franciscian Lake Mesa

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

Sec 7, 20N, 5W

12. COUNTY OR
PARISH

McKinley

13. STATE

New Mexico

1A. TYPE OF WELL:

OIL
WELL ☒GAS
WELL ☐DRY ☐

Other

B. TYPE OF COMPLETION:

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

Other

2. NAME OF OPERATOR

Basin Fuels, Ltd.

3. ADDRESS OF OPERATOR

300 W. Arrington, Suite 300, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

2310' FSL & 1650' FWL

At top prod. interval reported below

same

At total depth

Same

14. PERMIT NO.

DATE ISSUED

JUN 26 1981

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

15. DATE SPUDDED

3/11/81

16. DATE T.D. REACHED

3/18/80

17. DATE COMPL. (Ready to prod.)

5/1/80

18. ELEVATIONS (DF, REB, ST, OR, ETC.)*

6778 GL

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

3070

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

3052

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

XX

CABLE TOOLS

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

2824 - 2840

25. WAS DIRECTIONAL
SURVEY MADE

yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

IES & FDC open hole logs

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	24.0	90'	12 1/4	100 sks class B+2%CaCl ₂	
4 1/2	9.5	3033	6 1/4	250 sks 65/35 POZ +12% gel	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)
None				

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 3/8	2196	None

31. PERFORATION RECORD (Interval, size and number)

2824-2830 2 jet shots per foot
2836 -2840 2 jet shots per foot

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2824-2840	500 gal 15% HCL with 3 gal/ of 15N
2824-2840	16,000 gal wtr +2%KCL, 40#/1 WG-6, 20#/1000 admite aqua, 20#/1000 CW-1, 2 g.

33. PRODUCTION 1000 Frac Flow II, 1 gal/1000 LP-55 sca

DATE FIRST PRODUCTION 5/17/80 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Tubing Pump - 1 3/4" WELL STATUS (Producing or shut-in) Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
5/20/81	24 hours	3/4	→	4	TSTM	1110	TSTM
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
25	-0-	→	4	TSTM	1110		

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

Lease Gas

TEST WITNESSED BY

R. Sandoval

35. LIST OF ATTACHMENTS

None

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

SIGNED

Jack D. Cook

TITLE

Agent

DATE

1-1981/24/81

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

OPERATOR

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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 TOP FACE VENT. DEPTH
				La Ventana	983'
				Chacra	1341'
				Cliff House	1887'
				Menefee	1949'
				Point Lookout	2187'

INJECTION WELL DATA SHEET

GEORGE E. COLEMAN

ROBINSON - COLEMAN

OPERATOR

LEASE

3

660' FNL X 990' FWL

SEC 13

T20N

R6W

WELL NO.

FOOTAGE LOCATION

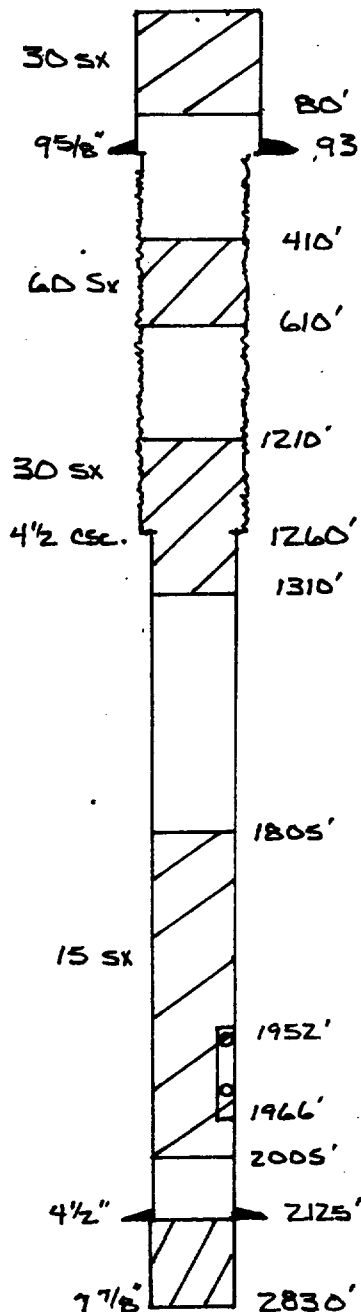
SECTION

TOWNSHIP

RANGE

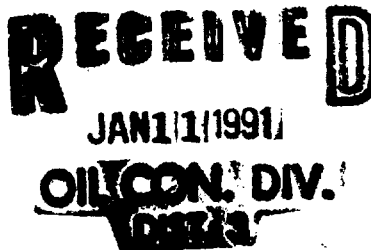
FRANCISCAN LAKE FIELD

MCKINLEY COUNTY, NEW MEXICO

SchematicTabular DataSurface CasingSize 9-5/8 " Cemented with 100 sx.TOC SURF feet determined by CIRC.Hole size 12-1/4"Intermediate CasingSize N/A " Cemented with _____ sx.

TOC _____ feet determined by _____

Hole size _____

Long string *Size 4-1/2 " Cemented with 175 sx.TOC 1260 feet determined by FREE POINTHole size 7-7/8"Total depth 2125'Injection interval N/A_____ feet to _____ feet
(perforated or open-hole, indicate which)*PARTIAL RECOVERY @ PxA
COPIES OF REPORTS ATTACHED.Tubing size _____ lined with _____ set in a
(material)
_____ packer at _____ feet.
(brand and model)

(or describe any other casing-tubing seal).

Other Data

- Name of the injection formation _____
- Name of Field or Pool (if applicable) _____
- Is this a new well drilled for injection? ☐ Yes ☐ No
If no, for what purpose was the well originally drilled? _____
- Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used) _____
- Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. _____

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. N.M. 15646	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR GEORGE E. COLEMAN		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Suite 300, 300 W. Arrington, Farmington, New Mexico 87401		8. FARM OR LEASE NAME ROBINSON-COLEMAN	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FNL and 990' FWL At top prod. interval reported below SAME At total depth SAME		9. WELL NO. 3	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUNDED 12/06/78		16. DATE T.D. REACHED 12/29/78	
17. DATE COMPL. (Ready to prod.) P & A- 04/18/79		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6780 Ground	
19. ELEV. CASINGHEAD NONE		20. TOTAL DEPTH, MD & TVD 2830	
21. PLUG, BACK T.D., MD & TVD P & A		22. IF MULTIPLE COMPL., HOW MANY* NONE	
23. INTERVALS DRILLED BY →		ROTARY TOOLS 0-2830	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* P & A		CABLE TOOLS NONE	
25. WAS DIRECTIONAL SURVEY MADE YES		26. TYPE ELECTRIC AND OTHER LOGS RUN IES, DENSITY AND NEUTRON AND CBL	
27. WAS WELL CORED NO		28. CASING RECORD (Report all strings set in well)	
CASING SIZE 9 5/8		WEIGHT, LB./FT. 36.0	
DEPTH SET (MD) 93'		HOLE SIZE 12 1/4	
CEMENTING RECORD 100 sacks class "B" + 2% CaCl ₂ - circulated		AMOUNT FULLED NONE	
4 1/2"		10.5	
2125'		7 7/8	
175 sacks class "B"		1260'	
29. LINER RECORD		30. TUBING RECORD	
SIZE NONE		SIZE NONE	
TOP (MD) NONE		DEPTH SET (MD) NONE	
BOTTOM (MD)		PACKER SET (MD)	
SACKS CEMENT*		SCREEN (MD)	
31. PERFORATION RECORD (Interval, size and number) 1952'- 1966', 0-4", 28 holes		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD) 1952-1966		AMOUNT AND KIND OF MATERIAL USED 500 gal 15% HCL	
33.* PRODUCTION		WELL STATUS (Producing or shut-in)	
DATE FIRST PRODUCTION WELL P & A		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) 04/18/79 REFER TO SUNDRY NOTICE	
DATE OF TEST		HOURS TESTED	
CHOKE SIZE		PROD'N. FOR TEST PERIOD	
OIL—BRL.		GAS—MCF.	
WATER—BRL.		GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE	
CALCULATED 24-HOUR RATE		OIL—BRL.	
GAS—MCF.		WATER—BRL.	
OIL GRAVITY-API (CORR.)		TEST WITNESSED BY	
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>JACK D. COOK</u> TITLE _____ AGENT _____ DATE April 19, 1979	

*(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.)

ROBINSON 7/21/11 E

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.																	
			<table border="1"> <thead> <tr> <th rowspan="2">NAME</th> <th colspan="2">TOP</th> </tr> <tr> <th>MEAS. DEPTH</th> <th>TRUE VERT. DEPTH</th> </tr> </thead> <tbody> <tr> <td>PICTURED CLIFF</td> <td>480'</td> <td></td> </tr> <tr> <td>CLIFF HOUSE</td> <td>1675'</td> <td></td> </tr> <tr> <td>MENEPEE</td> <td>1795'</td> <td></td> </tr> <tr> <td>POINT LOOKOUT</td> <td>2750'</td> <td></td> </tr> </tbody> </table>	NAME	TOP		MEAS. DEPTH	TRUE VERT. DEPTH	PICTURED CLIFF	480'		CLIFF HOUSE	1675'		MENEPEE	1795'		POINT LOOKOUT	2750'	
NAME	TOP																			
	MEAS. DEPTH	TRUE VERT. DEPTH																		
PICTURED CLIFF	480'																			
CLIFF HOUSE	1675'																			
MENEPEE	1795'																			
POINT LOOKOUT	2750'																			

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR

GEORGE E. COLEMAN

3. ADDRESS OF OPERATOR

87401

Suite 300, 300 W. Arrington, Farmington, N.Mex.

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 660' FNL and 990' FWL

AT TOP PROD. INTERVAL: SAME

AT TOTAL DEPTH: SAME

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☐(other) ☐

SUBSEQUENT REPORT OF:

☐☐☐☐☐☐☐☒

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

04/18/79 MIRUPU- Rig up Go Wireline. Run free point survey. Found casing free at 1260'. Plug and abandon well as follows:

Plug #1- 15 sacks class "B" cement from 1805' to 2005'.

Plug #2- 30 sacks class "B" cement from 1210' to 1310'.

Plug #3- 60 sacks class "B" cement from 410' to 610'.

Plug #4- 30 sacks class "B" cement from 0 to 80'.

4½" casing shot off at 1260', and pulled. Well P and A- 4:30 PM 04/18/79- Installed dry hole marker. Pits will be filled as soon as practical, and location restored to BLM specifications.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED

JACK D. COOK

TITLE

AGENT

DATE

April 19, 1979

(This space for Federal or State office use)

APPROVED BY

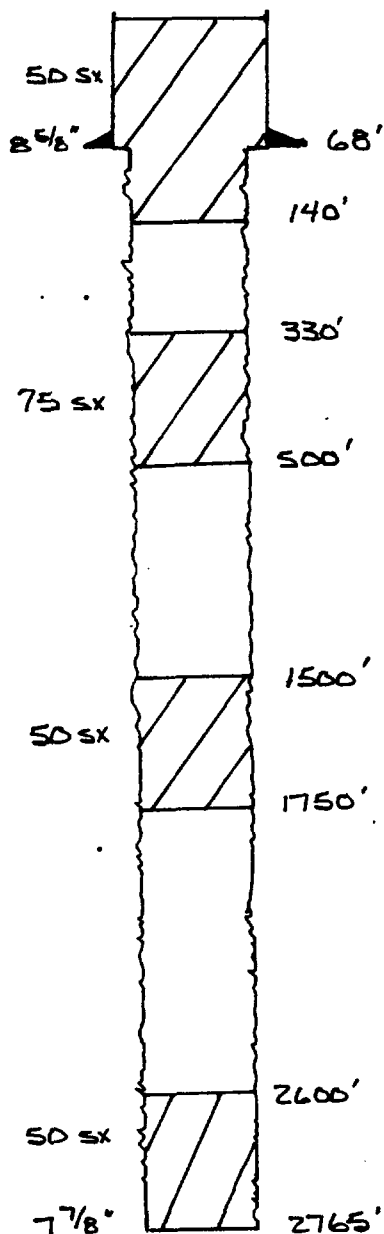
TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

INJECTION WELL DATA SHEET

BASIN FUELS LTD.		NOO NAVAJO		
OPERATOR		LEASE		
5X	2320' FSL 1650' FEL	SEC 13	T20N	R6W
WELL NO.	FOOTAGE LOCATION	SECTION	TOWNSHIP	RANGE
FRANCISCAN LAKE FIELD		MCKINLEY COUNTY, NEW MEXICO		

SchematicTubular DataSurface CasingSize 8-5/8 " Cemented with 60 sx.TOC SURF feet determined by CIRC.Hole size 12-1/4Intermediate CasingSize N/A " Cemented with _____ sx.

TOC _____ feet determined by _____

Hole size _____

Long stringSize N/A " Cemented with _____ sx.

TOC _____ feet determined by _____

Hole size 7-7/8Total depth 2765'Injection interval N/A_____ feet to _____ feet
(perforated or open-hole, indicate which)

COPIES OF PLUGGING REPORTS ATTACHED.

RECEIVED
JAN 11 1991
OIL CON. DIV
DIST. 3

Tubing size _____ lined with _____ set in a _____
(material)
_____ packer at _____ feet.
(brand and model)

(or describe any other casing-tubing seal).

Other Data

- Name of the injection formation _____
- Name of field or pool (if applicable) _____
- Is this a new well drilled for injection? ☐ Yes ☐ No
If no, for what purpose was the well originally drilled? _____
- Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used) _____
- Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. _____

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget 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 _____						
2. NAME OF OPERATOR Basin Fuels, Ltd.															
3. ADDRESS OF OPERATOR 300 W. Arrington, Suite 300, Farmington, NM 87401															
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2320' FSL & 1650' FEL At top prod. interval reported below At total depth															
14. PERMIT NO.					DATE ISSUED										
15. DATE SPUDDED 1/25/79															
16. DATE T.D. REACHED 2/1/79															
17. DATE COMPL. (Ready to prod.) P & A 2-2-79															
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6704 Ground															
19. ELEV. CASINGHEAD None															
20. TOTAL DEPTH, MD & TVD 2765'															
21. PLUG, BACK T.D., MD & TVD P & A															
22. IF MULTIPLE COMPL., HOW MANY* -----															
23. INTERVALS DRILLED BY -> 0-2765															
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* P & A															
25. WAS DIRECTIONAL SURVEY MADE															
26. TYPE ELECTRIC AND OTHER LOGS RUN IES, compensated density, gamma ray, caliper															
27. WAS WELL CORED No															
28. CASING RECORD (Report all strings set in well)															
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED					
8 5/8"		24.0		68'		12 1/4		60 sacks Class "B" + 2% CaCl ₂		None					
29. LINER RECORD															
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)							
None															
30. TUBING RECORD															
SIZE		DEPTH SET (MD)		PACKER SET (MD)											
31. PERFORATION RECORD (Interval, size and number) P & A															
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.															
DEPTH INTERVAL (MD)						AMOUNT AND KIND OF MATERIAL USED									
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		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.		WATER—BBL.		GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.		CIL GRAVITY-API (CORR.)			
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 Jack D. Cook				TITLE Agent				DATE 2-5-79							

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

NOTE: Refer to Sundry notice for plugging information.

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
	NONE			Pictured Cliff	430'	--
				Cliffhouse	1625'	
				Menefee	1756'	
				Point Lookout	2722'	

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ gas ☐ other ☐
well well

2. NAME OF OPERATOR

Basin Fuels, Ltd.

3. ADDRESS OF OPERATOR

300 W. Arrington, Suite 300, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 2320' FSL & 1650' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☒(other) ☐

SUBSEQUENT REPORT OF:

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Refer to sundry notice for surface casing detail. Drill 7 7/8" hole to TD 2765'. Ran IES, CDL, Gamma Ray, Caliper logs. Open log interpretation indicates well to be non-commercial. See reverse side for formation logs. Propose to plug and abandon well as follows:

Plug #1 50 sks Class "B" cement 2600-2765'

Plug #2 75 sks Class "B" cement 1500-1750'

Plug #3 50 sks Class "B" cement 330-500'

Plug #4 50 sks Class "B" cement 80-140'

Install dry marker. Restore location to BIA * USGS specification

Subsurface Safety Valve: Manu. and Type _____

18. I hereby certify that the foregoing is true and correct

SIGNED

Jack D. Cook

TITLE

Agent

DATE

(This space for Federal or State office use)

APPROVED BY

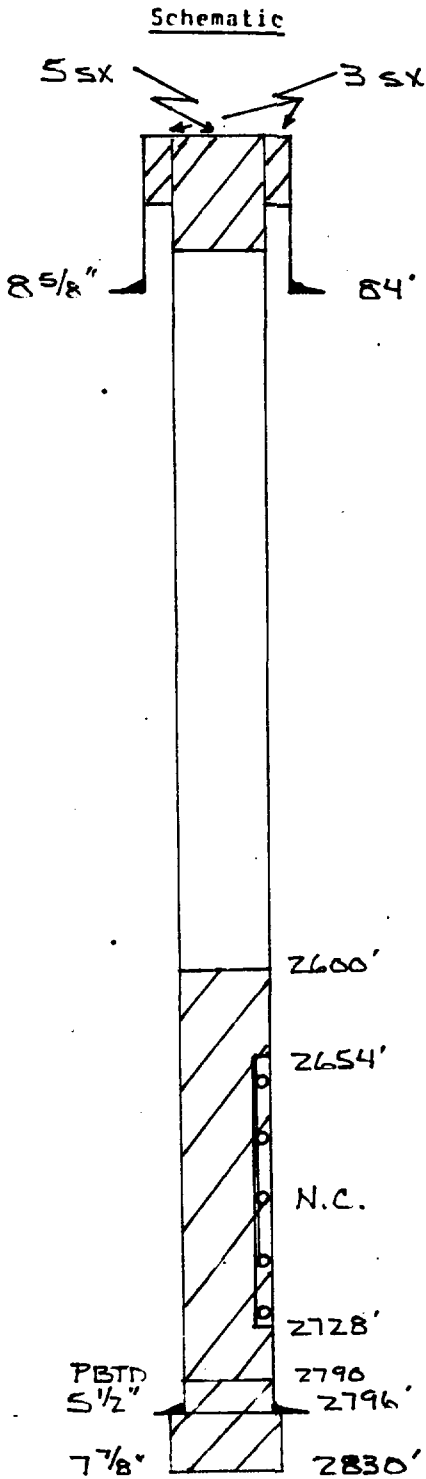
TITLE

DATE

CONDITIONS OF APPROVAL IF ANY:

INJECTION WELL DATA SHEET

GEORGE E. COLEMAN OPERATOR		ROBINSON COLEMAN LEASE		
4	2310' FNL X 2310' FWL	SEC 13	T20N	R6W
WELL NO.	FOOTAGE LOCATION	SECTION	TOWNSHIP	RANGE
	FRANCISCAN LAKE FIELD	MCKINLEY COUNTY, NEW MEXICO		



Tubular Data

Surface Casing
 Size 8-5/8 " Cemented with 100 sx.
 TOC SURF feet determined by CIRC.
 Hole size 11-1/4

Intermediate Casing
 Size N/A " Cemented with _____ sx.
 TOC _____ feet determined by _____
 Hole size _____

Long string
 Size 5-1/2 " Cemented with 410 sx.
 TOC SURF feet determined by CIRC.
 Hole size 7-7/8"
 Total depth 2830'
 Injection interval N/A
 _____ feet to _____ feet
 (perforated or open-hole, indicate which)

COPIES OF REPORTS ATTACHED.

RECEIVED
 JAN 11 1991
 OIL CON. DIV
 DIST. 3

Tubing size _____ lined with _____ (material) set in a _____ packer at _____ feet.
 (brand and model)

(or describe any other casing-tubing seal).

Other Data

- Name of the injection formation _____
- Name of Field or Pool (if applicable) _____
- Is this a new well drilled for injection? ☐ Yes ☐ No
 If no, for what purpose was the well originally drilled? _____
- Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used) _____
- Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. _____

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 47-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 <u>D & A</u>
2. NAME OF OPERATOR		George E. Coleman					
3. ADDRESS OF OPERATOR		Drawer 3337 Farmington, New Mexico 87401					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface <u>2310'FNL, 2310'FWL</u> At top prod. interval reported below At total depth <u>Same</u>					
14. PERMIT NO.		DATE ISSUED		12. COUNTY OR PARISH <u>McKinley</u>		13. STATE <u>New Mexico</u>	
15. DATE SPUDDED <u>1-15-79</u>	16. DATE T.D. REACHED <u>1-24-79</u>	17. DATE COMPL. (Ready to prod.) <u>P&A 6-16-79</u>		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* <u>6722 Gr</u>		19. ELEV. Casinghead <u>6723</u>	
20. TOTAL DEPTH, MD & TVD <u>TD 2830</u>		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY <u>0-2830</u>	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* <u>P&A</u>		25. WAS DIRECTIONAL SURVEY MADE <u>Yes</u>		26. TYPE ELECTRIC AND OTHER LOGS RUN <u>Induction Electric & Formation Density</u>		27. WAS WELL CORED <u>No</u>	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
<u>8-5/8</u>		<u>24#</u>		<u>84'</u>		<u>11 1/4"</u>	
<u>5 1/2</u>		<u>15.5#</u>		<u>2796'</u>		<u>7-7/8</u>	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
31. PERFORATION RECORD (Interval, size and number)							
<u>Perf 2 @2654, 2 @2675,</u> <u>2 @2694, 4 @2697,</u> <u>2 @2706, 8 @2712-14,</u> <u>4 @2718, 16 @2724-28</u>							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
<u>Frac 2654-2728</u>							
<u>25,000 water, 34,000 sand,</u>							
<u>ATP 850, IR: 9 BPM</u>							
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					
DATE OF TEST		HOURS TESTED		CHOKER SIZE		PROD'N. FOR TEST PERIOD	
FLOW, TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY					
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		Original Signed By:		TITLE		Agent	
DATE		7-2-1979					

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

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 office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

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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.

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- 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 30: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

ROBINSON COLEMAN 4

38. GEOLOGIC MARKERS	NAME	MEAS. DEPTH	TRUE VERT. DEPTH	TOP	FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	7. 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
	Pictured Cliffs	440							
	Cliff House	1590							
	Menefee	1790							
	Point Lookout	2730							
	Total Depth	2830							



UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.
NM 15646

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER D & A		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR George E. Coleman		8. FARM OR LEASE NAME Robinson-Coleman	
3. ADDRESS OF OPERATOR Drawer 3337 Farmington, New Mexico 87401		9. WELL NO. 4	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310'FNL, 2310'FWL		10. FIELD AND POOL, OR WILDCAT Franciscan Lake KMW	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6722 Gr.	
		12. COUNTY OR PARISH McKinley	
		13. STATE New Mexico	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☒
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	(Other) ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

TD 2830, PB 2790, Dry & Abandon.
No casing pulled.
Set 200' cement plug 2600 to PB 2790.
Place 5 sacks cement in 5½ casing stub.
Place 3 sacks cement in annulus.
Install 4 x 4 dry hole marker.
Clean location and back-fill pits.
Will re-seed as soon as possible,
Job complete 6-16-1979.



18. I hereby certify that the foregoing is true and correct

Original Signed By:

SIGNED CLAUDE C. KENNEDY

TITLE Agent

DATE 6-25-1979

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

