

WELL RECORD

INSTRUCTIONS: This form should be executed in triplicate, preferably typewritten, and submitted to the nearest district office of the State Engineer. All sections, except Section 5, shall be answered as completely and accurately as possible when any well is drilled, repaired or deepened. When this form is used as a plugging record, only Section 1A and Section 5 need be completed.

Section 1

| | | | |
|--|--|--|--|
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| | | | |
| | | | |

(Plat of 640 acres)

(A) Owner of well CO2 Gas Well Known as A.S.Waddell no 1
Street and Number Harding County N.Mex.
City _____ State _____
Well was drilled under Permit No. _____ and is located in the
_____ ¼ _____ ¼ NW ¼ of Section 19 Twp. 20 Rge. 31 E
(B) Drilling Contractor I.G.Stinebaugh License No. 229
Street and Number _____
City Embudo State New Mexico
Drilling was commenced _____ 19_____
Drilling was completed _____ 19_____

Elevation at top of casing in feet above sea level _____ Total depth of well _____
State whether well is shallow or artesian _____ Depth to water upon completion _____

Section 2 PRINCIPAL WATER-BEARING STRATA

| No. | Depth in Feet | | Thickness in Feet | Description of Water-Bearing Formation |
|-----|---------------|----|-------------------|--|
| | From | To | | |
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

Section 3 RECORD OF CASING

| Dia in. | Pounds ft. | Threads in | Depth | | Feet | Type Shoe | Perforations | |
|---------|------------|------------|-------|--------|------|-----------|--------------|----|
| | | | Top | Bottom | | | From | To |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Section 4 RECORD OF MUDDING AND CEMENTING

| Depth in Feet | | Diameter Hole in in. | Tons Clay | No. Sacks of Cement | Methods Used |
|---------------|-----|----------------------|-----------|---------------------|--------------|
| From | To | | | | |
| 1205 | 900 | 5 3/16 | 2 1/2 | | Trip Bucket |
| 850 | 200 | 5 3/16 | 3 1/4 | | |
| 150 | 20 | 5 3/16 | 1 1/2 | | |
| | | | | | |

Section 5 PLUGGING RECORD

Name of Plugging Contractor L.G.Stinebaugh License No. 229
Street and Number _____ City Embudo State New Mexico
Tons of Clay used 7 1/4 Tons of Roughage used _____ Type of roughage _____
Plugging method used Trip Bucket Date Plugged Feb 21 to 26 19 61
Plugging approved by: _____ Cement Plugs were placed as follows:

| No. | Depth of Plug | | No. of Sacks Used |
|-----|---------------|------|-------------------|
| | From | To | |
| | 1325 | 1205 | 12 |
| | 900 | 850 | 5 |
| | 200 | 150 | 5 |
| | 20 | 00 | 5 |

Basin Supervisor

FOR USE OF STATE ENGINEER ONLY

Date Received

File No. Use Location No.

Section 6

LOG OF WELL

[illegible]

The undersigned hereby certifies that, to the best of his knowledge and belief, the foregoing is a true and correct record of the above described well.

Well Driller

WELL RECORD

INSTRUCTIONS: This form should be executed in triplicate, preferably typewritten, and submitted to the nearest district office of the State Engineer. All sections, except Section 5, shall be answered as completely and accurately as possible when any well is drilled, repaired or deepened. When this form is used as a plugging record, only Section 1A and Section 5 need be completed.

Section 1

| | | | |
|--|--|--|--|
| | | | |
| | | | |
| | | | |
| | | | |

(Plat of 640 acres)

(A) Owner of well CO" Gas. Well Known as A.S.Weddell no 1
Street and Number Harding County N.Mex.
City _____ State _____
Well was drilled under Permit No. _____ and is located in the
1/4 1/4 NW 1/4 of Section 19 Twp. 20 Rge. 31 E
(B) Drilling Contractor _____ License No. _____
Street and Number _____
City _____ State _____
Drilling was commenced _____ 19_____
Drilling was completed _____ 19_____

Elevation at top of casing in feet above sea level _____ Total depth of well _____
State whether well is shallow or artesian _____ Depth to water upon completion _____

Section 2 PRINCIPAL WATER-BEARING STRATA

| No. | Depth in Feet | | Thickness in Feet | Description of Water-Bearing Formation |
|-----|---------------|----|-------------------|--|
| | From | To | | |
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

Section 3 RECORD OF CASING

| Dia in. | Pounds ft. | Threads in | Depth | | Feet | Type Shoe | Perforations | |
|---------|------------|------------|-------|--------|------|-----------|--------------|----|
| | | | Top | Bottom | | | From | To |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Section 4 RECORD OF MUDDING AND CEMENTING

| Depth in Feet | | Diameter Hole in in. | Tons Clay | No. Sacks of Cement | Methods Used |
|---------------|-----|----------------------|-----------|---------------------|--------------|
| From | To | | | | |
| 1205 | 900 | 5 3/16 | 2 1/2 | | trip bucket |
| 850 | 200 | 5 3/16 | 3 1/4 | | |
| 150 | 20 | 5 3/16 | 1 1/2 | | |
| | | | | | |

Section 5 PLUGGING RECORD

Name of Plugging Contractor I.G.stinebaugh License No. W D 229
Street and Number _____ City Embudo State New Mexico
Tons of Clay used 7 1/4 Tons of Roughage used _____ Type of roughage _____
Plugging method used Trip Bucket Date Plugged Feb. 21 to 26 19 61
Plugging approved by: _____ Cement Plugs were placed as follows:

| No. | Depth of Plug | | No. of Sacks Used |
|-----|---------------|------|-------------------|
| | From | To | |
| | 1325 | 1205 | 12 |
| | 900 | 850 | 5 |
| | 200 | 150 | 5 |
| | 20 | 00 | 5 |

Basin Supervisor _____
FOR USE OF STATE ENGINEER ONLY
Date Received _____
File No. _____ Use _____ Location No. _____

LOG OF WELL

The undersigned hereby certifies that, to the best of his knowledge and belief, the foregoing is a true and correct record of the above described well.

Well Driller

WELL RECORD

INSTRUCTIONS: This form should be executed in triplicate, preferably typewritten, and submitted to the nearest district office of the State Engineer. All sections, except Section 5, shall be answered as completely and accurately as possible when any well is drilled, repaired or deepened. When this form is used as a plugging record, only Section 1A and Section 5 need be completed.

Section 1

CO2 Gas Well Known As Waddell no 1

| | | | |
|--|--|--|--|
| | | | |
| | | | |
| | | | |
| | | | |

(A) Owner of well _____
Street and Number Harding County N.Mex.
City _____ State _____
Well was drilled under Permit No. _____ and is located in the
1/4 1/4 NW 1/4 of Section 19 Twp. 20 Rge. 31 E
(B) Drilling Contractor _____ License No. _____
Street and Number _____
City _____ State _____
Drilling was commenced _____ 19____
Drilling was completed _____ 19____

(Plat of 640 acres)

Elevation at top of casing in feet above sea level _____ Total depth of well _____
State whether well is shallow or artesian _____ Depth to water upon completion _____

Section 2

PRINCIPAL WATER-BEARING STRATA

| No. | Depth in Feet | | Thickness in Feet | Description of Water-Bearing Formation |
|-----|---------------|----|-------------------|--|
| | From | To | | |
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

Section 3

RECORD OF CASING

| Dia in. | Pounds ft. | Threads in | Depth | | Feet | Type Shoe | Perforations | |
|---------|------------|------------|-------|--------|------|-----------|--------------|----|
| | | | Top | Bottom | | | From | To |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Section 4

RECORD OF MUDDING AND CEMENTING

| Depth in Feet | | Diameter Hole in in. | Tons Clay | No. Sacks of Cement | Methods Used |
|---------------|-----|----------------------|-----------|---------------------|--------------|
| From | To | | | | |
| 1205 | 900 | 5 3/16 | 2 1/2 | | Trip bucket |
| 850 | 200 | 5 3/16 | 3 1/4 | | |
| 150 | 20 | 5 3/16 | 1 1/2 | | |
| | | | | | |

Section 5

PLUGGING RECORD

Name of Plugging Contractor I.G.stinebaugh License No. 229
Street and Number _____ City Embudo State New Mexico
Tons of Clay used 7 1/4 Tons of Roughage used _____ Type of roughage _____
Plugging method used Trip Bucket Date Plugged Feb. 21 to 26 1961
Plugging approved by: _____ Cement Plugs were placed as follows:

| No. | Depth of Plug | | No. of Sacks Used |
|-----|---------------|------|-------------------|
| | From | To | |
| | 1325 | 1205 | 12 |
| | 900 | 850 | 5 |
| | 200 | 150 | 5 |
| | 20 | 00 | 5 also Marker |

Basin Supervisor _____
FOR USE OF STATE ENGINEER ONLY
Date Received _____
File No. _____ Use _____ Location No. _____

LOG OF WELL

The undersigned hereby certifies that, to the best of his knowledge and belief, the foregoing is a true and correct record of the above described well.