Submit To Appropriate District Office State Lease - 6 copies					State of New I							Form C-10	- 1
Fee Lease - 5 copie District I		Er	ergy,	, Minerals and Na	atural K	esources	WELL APINO				33		
1625 N. French Dr. District II	NM 88240		Oil Conservation Division					30-015-35341					
1301 W. Grand Ave District III	enue, Art	esia, NM 88210		1220 South St. Francis Dr.				5. Indicate			- C		
1000 Rio Brazos Ro District IV	d., Aztec,	NM 87410			Santa Fe, NM		J1.	-	State Oil &	TE XX	FE Se No.	Е 📋	\dashv
1220 S. St. Francis Dr., Santa Fe, NM 87505 WELL COMPLETION OR RECOMPLETION REPORT AND LOG							State Off &	Gas Dea.					
la. Type of Well		LETION	OR RECO			RIAN	D LOG		7. Lease Name	e or Unit A	reement l	Name	
OIL WI	ELL 🗆	GAS WEL	L DRY	ď	OTHER SWD			_	Karlsbad			Turino	
b. Type of Completion: NEW MORK DEEPEN PLUG DIFF. WELL OVER BACK RESVR. OTHERAPR - 2 2007													
2. Name of Operator Southwestern Energy Production Company OCD - ARTESIA, NM							1	8. Well No.					
3. Address of Ope 2350 N. Sa	rator m Hou	ston Park	wav. EAst	– Su	ite 125			\exists	9. Pool name o			٠	7
Houston, T	X 77	032							SWD; Del	aware			
4. Well Location	.1	2222			South			·O			Fas	et-	
Unit Letter			Feet Fro				ie and		Fe	et From Th: גניו	e	Liı	зе
Section 10. Date Spudded	11	Date T.D. Read	Townshi	ν		inge	29-E		MPM	Edd		County	_
01/31/2007		08/2007	nea 12.1		ompl. (Ready to Prod.) N/A	13	. Elevations (L L	RKB, RT, GR,	, etc.)	14. Elev	. Casinghead	
15. Total Depth 4000		16. Plug Bac 3934	k T.D.		Multiple Compl. How ones? N/A	Many	18. Interv Drilled By		Rotary Tools		Cable	Tools	
19. Producing Inte 3652 1-3		of this comple	tion - Top, Bo	tom, N	ame		<u>.</u>		2	0. Was Dir	ectional S	urvey Made No	
21. Type Electric and Other Logs Run CBL, CN 22. Was Well Cored No													
23.				CA	SING RECOR			trin					_
CASING SIZ 9-5/8	E	36	LB./FT.		DEPTH SET 766		OLE SIZE -1/4		CEMENTING 550 sxs		·	MOUNT PULLED	\dashv
7 3/0					-/	12	1/4		JJU 313				_
5-1/2 17 3993 7-7/8							1020 sx	s					
										·	<u> </u>		_
24.				LIN	ER RECORD			<u>25.</u>	TI	UBING R	ECORD		\dashv
SIZE	TOP		воттом		SACKS CEMENT	SCREEN	1	SIZE		DEPTH		PACKER SET	
								2-7	7/8	3616		3603	
26. Perforation re	approd (in	-tamual aima a	- d =b ==)			27 40	TD CHOT	ED A	CEIDE CEI	(E)E G	V IDD ZD	<u> </u>	-
Lower Bell C				94 5	shots		ID, SHOT, INTERVAL	FKA	CTURE, CEI				\dashv
			•		5'; 3832'-74'	3652	-3921		Acidize w	74700 ga	1sacid]
3881'-921'						3652	-3921	\perp	Frac w/87	,000 1bs	propp	ant & 57,000 ga	ds ge
					DDC	DIC	CLON						7
PRODUCTION Date First Production Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in)													
			,	,	5.5 5.1 1	-	<i>31 1 17</i>		'		,		
Date of Test	Hours	Tested	Choke Size		Prod'n For Test Period	Oil - Bbl	1	Gas -	- MCF	Water - B	Bbl.	Gas - Oil Ratio	
Flow Tubing	Casing	g Pressure	Calculated 2	4-	Oil - Bbl.	Gas -	MCF	w	ater - Bbl.	Oil C	iravity - A	API - (Corr.)	7
Press. Hour Rate													
29. Disposition of Gas (Sold, used for fuel, vented, etc.) Test Witnessed By													
27. Disposition of Gas (Gold, used for fuel, venieu, etc.)													
30. List Attachment	30. List Attachments												
31 .I hereby certif	y that t	he informati	on shown on		ides of this form as t		•	the b	est of my knov	wledge and		0.0.00	7
Signature	fug.	hall \$	lowar		Printed Martha (Name	C. Howa	rd Title	_e St	aff Regula alyst	atory	3	.30-2007 Date	-
E-mail Address								An	alyst				

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 25 through 29 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

South	eastern New Mexico	Northwe	Northwestern New Mexico				
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn. "B"				
T. Salt	T. Strawn	T. Kirtland-Fruitland	T. Penn. "C"				
B. Salt	T. Atoka	T. Pictured Cliffs	T. Penn. "D"				
T. Yates	T. Miss	T. Cliff House	T. Leadville				
T. 7 Rivers	T. Devonian	T. Menefee	T. Madison				
T. Queen	T. Silurian	T. Point Lookout	T. Elbert				
T. Grayburg	T. Montoya	T. Mancos	T. McCracken				
T. San Andres	T. Simpson	T. Gallup	T. Ignacio Otzte				
T. Glorieta	T. McKee	Base Greenhorn	T. Granite				
T. Paddock	T. Ellenburger	T. Dakota	T				
T. Blinebry	T. Gr. Wash	T. Morrison	Т.				
T.Tubb	T. Delaware Sand	T.Todilto	T				
T. Drinkard	T. Bone Springs	T. Entrada	T.				
T. Abo	T.	T. Wingate	T.				
T. Wolfcamp	T.	T. Chinle	T.				
T. Penn	T.	T. Permian	T.				
T. Cisco (Bough C) T.		T. Penn "A"	T.				

1			SANDS	OR GAS OR ZONE
No. 1, from	to	No. 3, from	toto	
No. 2, from	to	No. 4, from	to	• • • • • • • • • • • • • • • • • • • •
		TANT WATER SANDS		
Include data on rate of water	r inflow and elevation to whi	ch water rose in hole.		
No. 1, from	toto	feet	******	
		feet		
		feet		

LITHOLOGY RECORD (Attach additional sheet if necessary)

	From	То	Thickness In Feet	Lithology	From	То	Thickness In Feet	Lithology
				·				
}	!			<i>)</i>				
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Submit 3 Copies To Appropriate District Office	State of New Me		Form C-103		
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natu	ral Resources WELL	May 27, 2004 API NO.		
District II	OIL CONSERVATION	DIVISION	30-015-35341		
1301 W. Grand Ave., Artesia, NM 88210 District III	Month - Year 1220 South St. Fran	i na ina	5. Indicate Type of Lease STATE xx FEE		
	ina – Nanta Pe NIVI X i		6. State Oil & Gas Lease No.		
District IV 1220 S. St. Francis Dr., Santa Fe, NM OC 87505	D - ADTECIA	0. 5	io on a cub ziona i i i		
SUNDRY NOT	ICES AND REPORTS ON WELLS	7. Lea	ase Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPO	SALS TO DULL OR TO DEEPEN OR PLI CATION FOR PERMIT" (FORM C-101) FO	JG BACK TO A			
PROPOSALS.)	·		ad Corall SWD		
1. Type of Well: Oil Well	Gas Well Other SWD		<u> </u>		
Name of Operator Southwestern Energy Production	uction Company		RID Number 14811		
3. Address of Operator		1 01 10	ool name or Wildcat : Delaware		
	, Fast -Suite 125, Houston, T	X 70032	, Delaware		
4. Well Location Unit Letter J:	2222 feet from the South	line and 2640	feet from the Fast line		
Section 11	icct from the		M Fddy County		
Section 11	11. Elevation (Show whether DR, 3093 GL	RKB, RT, GR, etc.)	12 Fiday County		
Pit or Below-grade Tank Application		A Distance Comm			
Pit type Depth to Groundw Pit Liner Thickness: mil		ater well Distance from bbls; Construction			
12. Check A	Appropriate Box to Indicate N	ature of Notice, Report	or Other Data		
	ITENTION TO:	· ·	ENT_REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON CHANGE BLANG	REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON DULL OR ALTER CASING	CHANGE PLANS MULTIPLE COMPL	COMMENCE DRILLING C CASING/CEMENT JOB	PPNS.□ PANDA □		
			1		
OTHER:	lated an arctions (Classic state all s	OTHER: Perforate &			
			ertinent dates, including estimated date lbore diagram of proposed completion		
or recompletion.		-			
AMENDED ADMINISTRATIVE ORDER	WAS APPROVED 02/25/2007 00	MPLETION OPERATIONS (O	2/15/2007 - 03/09/2007)		
Run porosity and cement bond	loos. Tao PBD @ 3034' Porf	I Roll Convon formet	ion @ 1 shot per 2 ft.: 3652482';		
3711'-19'; 3753'-57'; 3784'-8	16'; 3832'-74' and 3881'-921'	(94 shots). Acidize	perfs w/4700 gal 15% HCl @ 12 BPM		
and 2000 her. Sand Hacture	same interval w/8/.UU) lbs 16.	/30 sand and 57,000 oa] cross-link as 1 @ 82 hrm & 1643 as:		
Clean out sand and run inject:	ion equipment as follows: 36	16' 2-7/8" fiberolass-i	liped I-55 tubing w/plactic-costed		
5-1/2 packer set @ 3003 . In	Itial BHP w/pressure guage = 1	1901 psi. Disposal beg	gan 03/09/2007 @ 1037 BWPD & 300 psi.		
		" , "			
			: 6		
I hereby certify that the information grade tank has been/will be constructed or			lief. I further certify that any pit or below- ached) alternative OCD-approved plan .		
SIGNATURE MONTHS	240ward TITLE St	aff Regulatory Analyst	DATE 3.30.007		
Martha C. Howard Type or print name	E-mail add	lress:	Telephone No. 281-618-4887		
For State Use Only	RECORDS ONLY		APR 0 3 2007		
APPROVED BY:	TITLE		DATE		
Conditions of Approval (if any):					