

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED  
OMB NO. 1004-0137  
Expires: March 31, 2007

5. Lease Serial No. <b>NMSF-078499</b>																																																																																	
6. If Indian, Allottee or Tribe Name <b>NA</b>																																																																																	
7. Unit or CA Agreement Name and No. <b>9638 N M N M 88244</b>																																																																																	
8. Lease Name and Well No. <b>Federal 31-23 #3</b>																																																																																	
9. AFI Well No. <b>30-045-31981</b>																																																																																	
10. Field and Pool, or Exploratory <b>Basin Fruitland Coal</b>																																																																																	
11. Sec., T., R., M., on Block and Survey or Area <b>Sec. 23 T28N - R8W</b>																																																																																	
12. County or Parish <b>San Juan</b>																																																																																	
13. State <b>NM</b>																																																																																	
17. Elevations (DF, RKB, RT, GL)*																																																																																	
1. a. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other																																																																																	
b. Type of Completion: <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr., Other _____																																																																																	
2. Name of Operator <b>Richardson Operating Company</b>																																																																																	
3. Address <b>3100 La Plata Highway, Farmington, NM 87401</b>																																																																																	
3a. Phone No. (include area code) <b>505-564-3100</b>																																																																																	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface <b>820' FNL &amp; 1105' FWL Sec. 23 T28N - R8W</b> At top prod. interval reported below At total depth <b>Same as above</b>																																																																																	
14. Date Spudded <b>12/15/2004</b>																																																																																	
15. Date T.D. Reached <b>12/23/2004</b>																																																																																	
16. Date Completed <b>03/04/2005</b> <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod.																																																																																	
18. Total Depth: MD <b>2941' GL</b> TVD																																																																																	
19. Plug Back T.D.: MD <b>2916' GL</b> TVD																																																																																	
20. Depth Bridge Plug Set: MD TVD																																																																																	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) <b>Compensated Neutron Density Log</b>																																																																																	
22. Was well cored? <input type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit copy)																																																																																	
23. Casing and Liner Record (Report all strings set in well)																																																																																	
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\*(See instructions and spaces for additional data on page 2)

NMOCD

28b. Production - Interval C									
Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

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Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

30. Summary of Porous Zones (Include Aquifers): 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.				31. Formation (Log) Markers	
Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
<b>Fruitland Coal</b>	<b>2734'</b>	<b>2827'</b>			

32. Additional remarks (include plugging procedure):

33. Indicate which items have been attached by placing a check in the appropriate boxes:

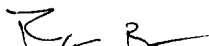
- ☐ Electrical/Mechanical Logs (1 full set req'd.)   
 ☐ Geologic Report   
 ☐ DST Report   
 ☐ Directional Survey  
☐ Sundry Notice for plugging and cement verification   
 ☐ Core Analysis   
 ☐ Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)\*

Name (please print) **Ryan Bruner**

Title **Geologist**

Signature



Date **03/08/2005**

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.