

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 <input type="checkbox"/>                                    | GAS WELL <input type="checkbox"/>              | DRY <input checked="" type="checkbox"/> | Other _____                        |
| b. TYPE OF COMPLETION:   |                               | NEW WELL <input checked="" type="checkbox"/>                         | WORK OVER <input type="checkbox"/>             | DEEP-EN <input type="checkbox"/>        | PLUG BACK <input type="checkbox"/> |
|  |                               | DIFF. RESVR. <input type="checkbox"/>                                | Other _____                                    |   |                                    |
| 2. NAME OF OPERATOR<br>Chace Oil Company, Inc.   |                               |  |  |   |                                    |
| 3. ADDRESS OF OPERATOR<br>313 Washington SE, Albuquerque, NM 87108   |                               |  |  |   |                                    |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*<br>At surface Unit "A" 790' NL & EL<br>At top prod. interval reported below<br>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, RSB, RT, GR, ETC.)*        | 19. ELEV. CASINGHEAD                    |                                    |
| 5-17-78  | 6-17-78                       | Plugged 6-17-78  | 5687 GR  | None                                    |                                    |
| 20. TOTAL DEPTH, MD & TVD  | 21. PLUG, BACK T.D., MD & TVD | 22. IF MULTIPLE COMPL., HOW MANY*                                    | 23. INTERVALS DRILLED BY                       | ROTARY TOOLS                            | CABLE TOOLS                        |
| 2585   | None                          | None   | 0-2585   | No                                      | No                                 |
| 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*<br>None  |                               |  |  |   | 25. WAS DIRECTIONAL SURVEY MADE    |
| 26. TYPE ELECTRIC AND OTHER LOGS RUN<br>Induction-Density  |                               |  |  |   | 27. WAS WELL CORED<br>No           |
| 28. CASING RECORD (Report all strings set in well)   |                               |  |  |   |                                    |
| CASING SIZE  | WEIGHT, LB./FT.               | DEPTH SET (MD)   | HOLE SIZE                                      | CEMENTING RECORD                        | AMOUNT PULLED                      |
| 7"   | 20                            | 557  | 9-7/8  | 220 SCS                                 | None                               |
| 29. LINER RECORD   |                               |  |  |   |                                    |
| SIZE   | TOP (MD)                      | BOTTOM (MD)  | SACKS CEMENT*                                  | SCREEN (MD)                             |                                    |
| 30. TUBING RECORD  |                               |  |  |   |                                    |
| SIZE   | DEPTH SET (MD)                | PACKER SET (MD)  |  |   |                                    |
| 31. PERFORATION RECORD (Interval, size and number)<br>None   |                               |  | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. |   |                                    |
|  |                               |  | DEPTH INTERVAL (MD)<br>None                    |   |                                    |
|  |                               |  | 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.                           |
| 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.)   |                               |  |  |   |                                    |
| 35. LIST OF ATTACHMENTS<br>See Attachment  |                               |  |  |   |                                    |
| 36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records  |                               |  |  |   |                                    |
| SIGNED <u>Raymond M. Carey</u>   |                               |  | TITLE President                                |   | DATE 9-5-78                        |

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

P.F.K.