

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 checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	Other <input type="checkbox"/>			
b. TYPE OF COMPLETION:		NEW WELL <input type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other <input type="checkbox"/>	
2. NAME OF OPERATOR TXO Production Corp.						5. LEASE DESIGNATION AND SERIAL NO. NM-14000		
3. ADDRESS OF OPERATOR 900 Wilco Bldg. Midland, Texas 79701						6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660FNL & 3210FEL At top prod. interval reported below 2310 At total depth						7. UNIT AGREEMENT NAME		
14. PERMIT NO.						8. FARM OR LEASE NAME Burleson Federal		
DATE ISSUED 10/29/85						9. WELL NO. 1		
15. DATE SPUDDED 11/02/85						10. FIELD AND POOL, OR WILDCAT Querecho Springs Plains (Upper Bone)		
16. DATE T.D. REACHED 11/18/85						11. SEC. T., R., M. OR BLOCK AND SURVEY OR AREA Sec. 26, T-18-S, R-32-1		
17. DATE COMPL. (Ready to prod.) 12-10-85						12. COUNTY OR PARISH Lea		
18. ELEVATIONS (DF, R&B, RT, GR, ETC.)* 3762 G1 & 3777 KB						13. STATE New Mexico		
20. TOTAL DEPTH, MD & TVD 8700		21. PLUG, BACK T.D., MD & TVD 8613		22. IF MULTIPLE COMPL., HOW MANY*		19. ELEV. CASINGHEAD		
23. INTERVALS DRILLED BY X						24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 8512-8572 (Bone Springs)		
25. WAS DIRECTIONAL SURVEY MADE Yes						26. TYPE ELECTRIC AND OTHER LOGS RUN SDL-DSN, DG-MG		
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
11 3/4		42		350		15	485sx "C"	
8 5/8		32		2300		11	1750sx Lite & 500sx C	
4 1/2		11.6 & 10.5		8700		7 7/8	430sx Lite & 775sx H	
29. LINER RECORD						30. TUBING RECORD		
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)
2 3/8		8402		3402		3402		
31. PERFORATION RECORD (Interval, size and number)						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
8512-8526						DEPTH INTERVAL (MD)		
8542-8572						AMOUNT AND KIND OF MATERIAL USED		
						3 1/8" gun, 4 holes, spt w/250gal 7 1/2% NEFE, acids w/1500gal 15% NEFE		
						3 1/8" gun, 8 holes, spt w/250gal. 7 1/2% NEFE, acidz w/2500gal		
33.* PRODUCTION						WELL STATUS (Producing or shut-in)		
DATE FIRST PRODUCTION 12-10-85		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				Producing		
DATE OF TEST 12-27-85		HOURS TESTED 24		CHOKE SIZE 22/64		PROD'N. FOR TEST PERIOD OIL—BBL. 240		GAS—MCF. 350
FLOW. TUBING PRESS. 200		CASING PRESSURE N/A		CALCULATED 24-HOUR RATE 24		WATER—BBL. 43		GAS-OIL RATIO 1458
OIL GRAVITY-API (CORR.) 45.6		OIL—BBL. 24		GAS—MCF. 350		WATER—BBL. 43		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented						TEST WITNESSED BY 1985 Jerry Fletcher		
35. LIST OF ATTACHMENTS C104, Plat, Sundry notices, Inclination report, Logs						36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		
SIGNED <u>Cecilia Henderson</u>						TITLE <u>Engineering Assistant</u>		
						DATE <u>12-26-85</u>		

*(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 purchase of copies can be obtained from the Bureau of Land Management, Department of the Interior, Washington, D.C. 20460. 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 core logs, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments shall be clearly identified and indexed, 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.)

Items 18, 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: "Scale/Comment": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 32: Attach a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

SUMMARY OF LOGS, ZONES, SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF, CORED INTERVALS, AND ALL DRILL-STEM TESTS, INCLUDING FACTS CONCERNING TEMPERATURE, TIME TOOL, OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			GEOLOGIC MARKERS		
Interval	Well	Log	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Bone Spring	8512	8573	Sandstone-fine-v.fine, sub-ang.-sub-rounded, fairly well sorted, fairly well cemented, pyritic, buff-tan, some grey, intergranular porosity.	1170	
			Rustler	3945	
			Queen	6786	
			Bone Spring	8381	
			1st Bone Spring Sand		

RECORDED
JAN 3 1966
BUREAU OF LAND MANAGEMENT

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input 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 _____										5. LEASE DESIGNATION AND SERIAL NO. NM-14000							
2. NAME OF OPERATOR TXO Production Corp.										6. IF INDIAN, ALLOTTEE OR TRIBE NAME							
3. ADDRESS OF OPERATOR 900 Wilco Building Midland, Texas 79701										7. UNIT AGREEMENT NAME							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660 FNL & 2310 FEL At top prod. interval reported below At total depth										8. FARM OR LEASE NAME Burleson Federal							
14. PERMIT NO. _____ DATE ISSUED _____										9. WELL NO. 1							
15. DATE SPUDDED _____ 16. DATE T.D. REACHED _____ 17. DATE COMPL. (Ready to prod.) _____										10. FIELD AND POOL, OR WILDCAT Querecho Upper Plains (Bone Springs)							
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* _____										11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 26, T-18-S, R-30							
19. ELEV. CASINGHEAD _____										12. COUNTY OR PARISH _____ 13. STATE _____							
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 _____							
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* _____										25. WAS DIRECTIONAL SURVEY MADE							
26. TYPE ELECTRIC AND OTHER LOGS RUN _____										27. WAS WELL CORED							
28. CASING RECORD (Report all strings set in well)																	
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED							
29. LINER RECORD												30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)			
31. PERFORATION RECORD (Interval, size and number)												32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
												DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
														15% NEFE, frac w/40,000 gal			
														minimax & 50,000# 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)							
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		<u>Alicia Henderson</u>								TITLE <u>Engineering Assistant</u>				DATE <u>12-26-85</u>			

*(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, dependent on applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the support of sections 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829

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 logs, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be filed on this form, see Item 22.

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 offices 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-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 netnet(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: "Stacks (*cont'd*)": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

STANDARD OF LIVES ZONES:

STORY ALL INFORMATION ON POSITIVE AND CONFIDENTIALITY, (GOLD INTERVIEWS), AND ALL OTHER, SUCH AS, INCLUDING BOTH PROPOSED, CLOSURE, OPEN, FLOWING AND SIFTING IN FRESHNESS, AND RECOVERIES

32

PHOTOLOGICAL MARKERS

NAME

MEAS. OF FIFTY

TRUE VERT. DEPTH

RECEIVED
JUN 10 1964

14

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section

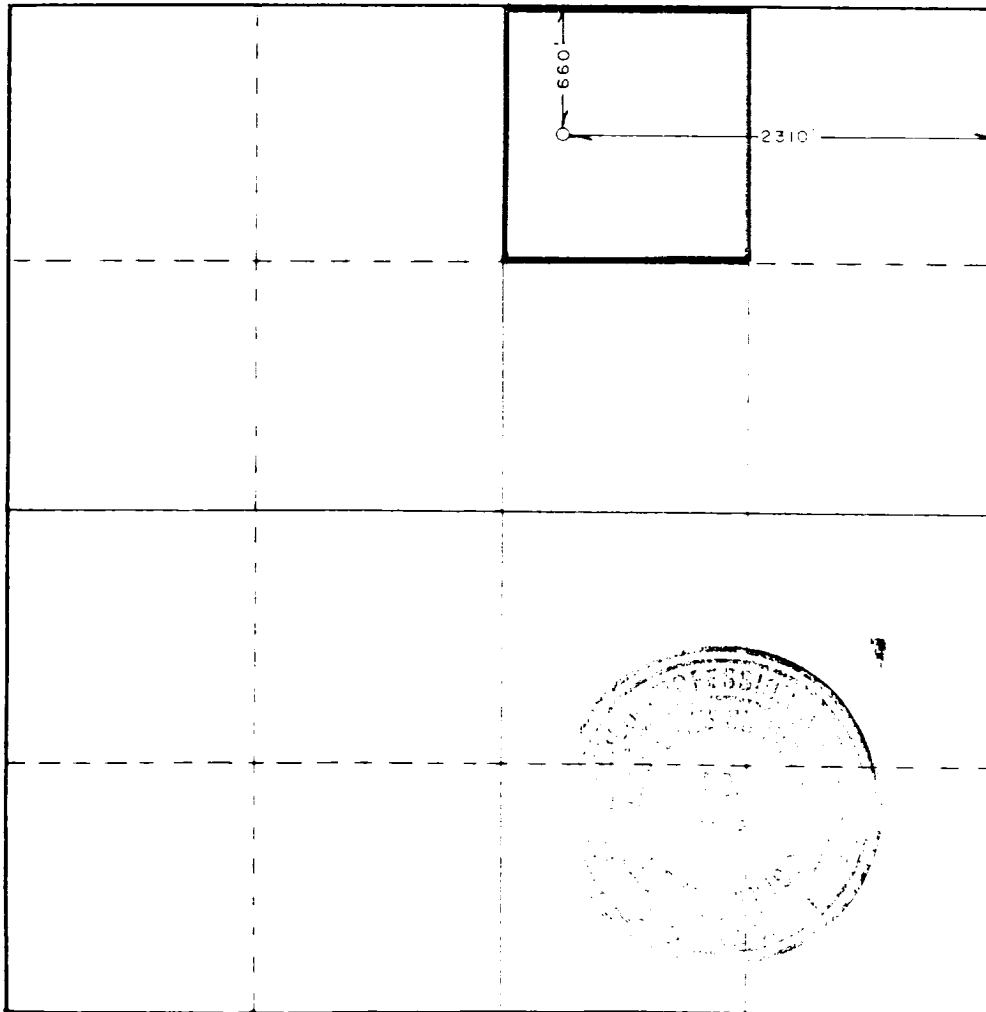
Operator TXO PRODUCTION COMPANY		Lease BURLISON FED.		Well No. 1
Tract Letter B	Section 26	Township 18 SOUTH	Range 12 EAST	County LEA
Actual Fracture Location of Well: 2310 feet from the EAST line and 660 feet from the NORTH line				
Ground Level Elev. 3762.0'	Producing Formation Bone Springs	Pool Querecho Plains	Dedicated Acreage 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

Alicia Henderson

By

Engineering Assistant

For

TXO Production Corp.

Date

12-27-85

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief

Date Surveyed

SEPTEMBER 22, 1987

Registered Professional Engineer

and/or Land Surveyor

John W. West

Certificate No. JOHN W. WEST.

676

RONALD J. EIDSON.

3239

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600