## UNITED STATES SUBMIT DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

Form approved. Budget Bureau No. 42-R355.5.

(See other instructions on reverse side)

Budget Bureau No. 42-K355.5.

LEASE DESIGNATION AND SERIAL NO.

|  | NM | 2507 | 0 |
|--|----|------|---|
|  |    |      |   |

|  |                |           |  |                |                  |                   |                |             |              | S IP INDIAN AL     | LOTTED OR TRIBE NAM                   |
|--|----------------|-----------|--|----------------|------------------|-------------------|----------------|-------------|--------------|--------------------|---------------------------------------|
| WELL CO  | MPLETION       | 1 OR      | RECON  | APLETI         | ON R             | REPORT /          | AN             | D LOG       | *            | O. IS INDIAN, AL   | DOILES OR TRIDE NAME                  |
| is. TYPE OF WEL                                    | L: oi          | L         | GAS<br>WELL                                      | DE             | x X              | Othe              | A              | 211         | A C          | Z UNIT AGREEM      | ENT NAME                              |
| b. TYPE OF COM                                     |                |           | -  |                |                  |                   | : U            |             |              | la Mesa            |                                       |
| NEW WELL   | WORK D         | EEP-      | PLUG<br>BACK                                     | DIFF           | R. 🗌             | Othe 1            |                |             |              | S FRM OB LEA       |                                       |
| . NAME OF OPERAT                                   |                |           | · · · · · · · · · · · · · · · · · · ·            |                |                  |                   | ΔHG            | 1 = 19      | 25           | La Mesa            | Unit                                  |
| Yates Pet  | roleum Co      | rpora     | ition  |                |                  |                   | 70C            | 1 1 10      |              | 9. WELL NO.        |                                       |
| . ADDRESS OF OPER                                  |                | _         |  |                | _                | OIL               | $\overline{C}$ | ON.         | DIV          | 2                  |                                       |
| 207 South  | 4th St.,       | , Arte    | sia, NM  | 1 8821         | 0                |                   |                |             |              |                    | OOL, OR WILDCAT                       |
| LOCATION OF WEL                                    | L (Report loca | tion clea | rly and in a                                     | ccordance      | with any         | y State require   | em e           | 18/31. J    |              | Wildcat            |                                       |
| At surface 2                                       | :310 FS 8      | , 2310    | FEL, S   |                |                  |                   | ,              |             |              | OR AREA            | I., OR BLOCK AND SURVI                |
| At top prod. into                                  | erval reported | below     |  | ۲t             | E                | CEIV              | / t            | : U         |              |                    |                                       |
| At total donth                                     |                |           |  |                | ١ ا              | UL <b>2 9</b> 198 | 35             |             |              | Unit J, S          | Sec. 24-17N-8                         |
| At total depth                                     |                |           |  | 14 PE          | MIT NO.          |                   |                | ISSUED      |              | 12. COUNTY OR      | 13. STATE                             |
|  |                |           |  | BUR            | EAU OF           | LAND MA           | NAG            | EMENT       |              | PARISH<br>Santa Fe | NM                                    |
| . DATE SPUDDED                                     | 16. DATE T.D.  | REACHE    | D   17. DATE                                     | COMPL.         | Ready to         | ON RESOU          | RCE            | AREA        | RKR. 1       | ,                  | 9. ELEV. CASINGHEAD                   |
| 11-30-84   | 7~3~85         |           | 1.   | Dry            |                  | 10.               |                | 6610' G     |              | 22, 42, 223.,      |                                       |
| , TOTAL DEPTH, MD                                  |                |           | T.D., MD & 1                                     |                |                  | TIPLE COMPL.,     |                | 23. INTE    | RVALS        | ROTARY TOOLS       | CABLE TOOLS                           |
| 7710 <b>'</b>                                      |                | _         |  |                | HOW M            | ANY*              |                | DRILI       | ED BY        | X                  | 1                                     |
| . PRODUCING INTER                                  | VAL(S), OF TH  | S COMPL   | ETION-TOP,                                       | BOTTOM,        | NAME (M          | (D AND TVD)*      | -              | 1           |              |                    | 25. WAS DIRECTIONAL                   |
| ,,   |                |           |  |                |                  |                   |                |             |              | }                  | SURVEY MADE                           |
| 9 ·  | Dry            |           |  |                |                  |                   |                |             |              | •                  | No                                    |
| 3. TYPE ELECTRIC A                                 | ND OTHER LOG   | S RUN     |  |                |                  |                   |                |             |              | 27                 | . WAS WELL CORED                      |
| CNL/FDC  | ; DLL          |           |  |                |                  |                   |                |             |              |                    | No                                    |
| 3.   |                |           | CASI   | NG RECO        | RD (Rep          | ort all strings   | set i          | n well)     |              |                    |                                       |
| CASING SIZE  | WEIGHT, L      | B./FT.    |  |                |                  | LE SIZE           |                |             |              |                    | AMOUNT PULLED                         |
| 20"  |                |           | 35 <b>'</b>                                      |                | 24               |                   |                | 3           | yds          | Readi-mix          |                                       |
| 13-3/8"  | 61#            |           | 395  |                | 17-              | -1/2"             |                |             | 0 sx         |                    |                                       |
| 9-5/8"   | 36 & 40        | )#        | 4037   | , •            |                  | -1/4"             |                | 17          | <u>'15 s</u> | x                  |                                       |
|  | ·              |           |  |                | 8-               | 1/2"              | <u> </u>       |             |              |                    |                                       |
| <b>)</b> .   |                | LINE      | RECORD   |                |                  |                   |                | 30.         |              | TUBING RECORI      |                                       |
| SIZE   | TOP (MD)       | BOTT      | OM (MD)  | SACKS CI       | MENT*            | SCREEN (MI        |                | SIZE        |              | DEPTH SET (MD)     | PACKER SET (MD                        |
|  |                | _         |  |                |                  |                   |                |             | -            |                    |                                       |
| DEDWAR AMION PEO                                   | Conn (Internal | eine and  | number)  |                |                  | <br>              |                | TD GTTOM    | TOTAL CO     | TIDE CEVENES       |                                       |
| 11. PERFORATION RECORD (Interval, size and number) |                |           |  |                |                  | 82. ACID,         |                |             |              | URE, CEMENT S      | OF MATERIAL USED                      |
|  |                |           |  |                |                  | DEPTH INT         | LERVA          | L (MD)      |              |                    | A A A A A A A A A A A A A A A A A A A |
|  |                |           |  |                | ÷                |                   |                |             |              |                    |                                       |
|  |                |           |  |                |                  |                   | -              |             |              |                    |                                       |
|  |                |           |  |                |                  |                   |                |             |              | <del></del>        |                                       |
| B.*  |                |           |  |                | PROI             | DUCTION           |                | · · · · · · |              |                    |                                       |
| ATE FIRST PRODUCT                                  | ION PR         | DUCTION   | METHOD (F  | lowing, g      | as lift, p       | umping—size       | and t          | ype of pum  | p)           | WELL ST            | ATUS (Producing or                    |
|  | ļ              |           |  |                |                  | -                 |                |             |              |                    | PEA                                   |
| ATE OF TEST  | HOURS TESTE    | D C       | HOKE SIZE  |                | N. FOR<br>PERIOD | OIL-BBL.          |                | GAS-MC      | F.           | WATER-BBL.         | GAS-OIL BATIO                         |
|  |                |           |  |                | <del></del>      |                   | -              | ł           |              |                    |                                       |
| LOW. TUBING PRESS.                                 | CASING PRES    |           | ALCULATED  | OIL—           | BBL.             | GAS-              | MCF.           |             | WATER-       | —BBL. OI           | L GRAVITY-API (CORR.)                 |
|  |                |           | <del></del>                                      |                |                  |                   |                | *           |              |                    |                                       |
| 4. DISPOSITION OF G                                | AS (Sold, used | for fuel, | vented, etc.)                                    |                |                  |                   |                | -           | VCC          | PLED 604           | 4(MOCOTO)                             |
|  |                |           |  |                |                  | · ·               |                | : .         | NOO          |                    | <u> </u>                              |
| 5. LIST OF ATTACH                                  |                |           |  |                |                  |                   |                | .;          |              | และ รื่องก็±       | 985                                   |
| Devia<br>6. I hereby certify                       | tion Surv      |           | matenah ad 1-                                    | form - +1      | la com-          | olata and ac-     | oot c          | a datamin   | d from       | all available rose | ords                                  |
| o. 1 nereny certify                                | that the lone  | our au    | 7)   | TOLEN WELLOI   | _                |                   |                |             | - 8          | RMINATUN KESE      | W. V. ARLA                            |
| SIGNED   | and            | al        | Load   | ad TI          | TLE              | Producti          | on             | Supervi     | Lsor         | DATE /             | 1/-20-85                              |
|  |                |           | <del>}                                    </del> | _ <del>-</del> |                  |                   |                |             | BY           |                    |                                       |
|  | *(5            | See Inst  | ructions a                                       | nd Spac        | es for A         | Additional l      | Data           | on Reve     | rse Sid      | le)                |                                       |

| *(See Instructions and Spaces for Additional   | ( <sub>p</sub> )   | <b>2</b>   | Revens S.  |
|--|--|--|--|
| The sanday Land Wille Treature   | FORM   | NW A   | <u>ervisor</u>   |
| Deviation Survey.  by certify that the foregoing nody attached information is complete an in-  | ATION  | RY OF  | sining fro   |
| '₹ ATTACHMENTS   |  | PORO<br>IMPOR  |  |
| STIDS OF CLR (April 1974) and the first first and  |  | TANT ZOI   |  |
| SC PRESS (ABING PADSHIE) CAUCHAIRD OFFICE  | )P   | UES:   | $E = \hat{\omega} \hat{\omega}^2$  |
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| STATION RECORD I RECTORDED FOR GREEN MARRIES.  |  | LEREOF   |  |
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| TATELY ALL MATRICES IN   |  |  | ,72%<br>   |
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ing. Maint

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 number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. 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 pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments Hem 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. Hems 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.

Hem 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.) 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. should be listed on this form, see item 35.