

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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LAND OFFICE	
OPERATOR	

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & Gas Lease No.

N/A

7. Unit Agreement Name

N/A

8. Farm or Lease Name

NORMAN

9. Well No.

1 (ONE)

10. Field and Pool, or Wildcat

WILDCAT

12. County

TERRANCE

1a. TYPE OF WELL
OIL WELL ☒ GAS WELL ☐ DRY ☐
b. TYPE OF COMPLETION
NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐

2. Name of Operator

FORMER T-POWELL

3. Address of Operator

1312 - RAMON ECHESTRE, N.W., ALBUQUERQUE, NM

4. Location of Well

UNIT LETTER K LOCATED 1803 FEET FROM THE S LINE AND 1970 FEET FROM

THE W LINE OF SEC. 5 TWP. 7N RGE. 8E NMPM

15. Date Spudded 7-16-82 16. Date T.D. Reached 7-16-82 17. Date Compl. (Ready to Prod.) 18. Elevations (DF, RKB, RT, GR, etc.) 19. Elev. Casinghead

20. Total Depth 230' 21. Plug Back T.D. 22. If Multiple Compl., How Many 23. Intervals Drilled By T.D. Rotary Tools Cable Tools

24. Producing Interval(s), of this completion - Top, Bottom, Name None

25. Was Directional Survey Made No

26. Type Electric and Other Logs Run GAMMA-NEUTRON

27. Was Well Cored No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
4 1/2	12.5	830	5 1/8	PEARSON-TEP	NONE

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
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31. Perforation Record (Interval, size and number) 205-218-24 SPTS

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
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33. PRODUCTION

Date First Production Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. 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 information shown on both sides of this form is true and complete to the best of my knowledge and belief.

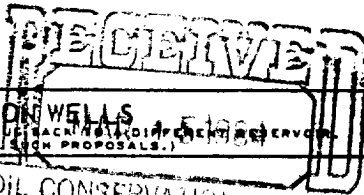
SIGNED FORMER T-POWELL TITLE PARTNER DATE 3-14-84

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Form C-103
Revised 10-1-78

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SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG EACH AND DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
2. Name of Operator Formwalt-Powell		5. State Oil & Gas Lease No. N/A
3. Address of Operator 1312-CAMINO Ecuestre, NW, Albuquerque, NM		7. Unit Agreement Name N/A
4. Location of Well UNIT LETTER <u>K</u> <u>1803</u> FEET FROM THE <u>S</u> LINE AND <u>1970</u> FEET FROM THE <u>W</u> LINE, SECTION <u>5</u> TOWNSHIP <u>7N</u> RANGE <u>8E</u> NMPM.		8. Farm or Lease Name Norman
15. Elevation (Show whether DF, RT, GR, etc.)		9. Well No. 1 (line)
12. County Torrance		10. Field and Pool, or Wildcat Wildcat

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Set 230'-4 1/2"-10.5# + Cemented to Top
Perforated - Acidized - Swabbed -
Fresh water encountered.
Converted to Water Well.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Formwalt-Powell TITLE Partner DATE 3-14-84
APPROVED BY _____ TITLE OIL AND GAS INSPECTOR DATE 3-27-84
CONDITIONS OF APPROVAL, IF ANY: