

Submit to Appropriate  
District Office  
State Leases - 6 copies  
Fee Leases - 5 copies  
**DISTRICT I**  
P.O. Box 1980, Hobbs, NM 88240

**DISTRICT II**  
P.O. Drawer DO, Artesia, NM 88210

**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-105  
Revised 1-1-89

|                              |                                                                        |
|------------------------------|------------------------------------------------------------------------|
| WELL A.P. NO.                | 30-059-20299                                                           |
| 5. Indicate Type of Lease    | STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. |                                                                        |

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

|                                                                                                                                                                                                                                                  |                                                        |                                               |                                                  |                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------------------|--------------------------------------------------|----------------------------------------|
| 1a. Type of Well:<br>OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER <u>02</u>                                                                                                 | 7. Lease Name or Unit Agreement Name<br>BDCD GU - 2134 |                                               |                                                  |                                        |
| b. Type of Completion:<br>NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DEEP RELIEF <input type="checkbox"/> OTHER <input type="checkbox"/> |                                                        |                                               |                                                  |                                        |
| 2. Name of Operator<br>Amoco Production Company                                                                                                                                                                                                  | 8. Well No.<br>301F                                    |                                               |                                                  |                                        |
| 3. Address of Operator<br>PO Box 606 CLAYTON NM 88415                                                                                                                                                                                            | 9. Pool Name or Wildcat<br>TUBB                        |                                               |                                                  |                                        |
| 4. Well Location<br>Unit Letter <u>F</u> : <u>2026</u> Feet From The <u>WEST</u> Line and <u>1979</u> Feet From The <u>NORTH</u> Line<br>Section <u>30</u> Township <u>T21N</u> Range <u>R34E</u> N40PM <u>UNION</u> County                      |                                                        |                                               |                                                  |                                        |
| 10. Date Spudded<br>7-17-93                                                                                                                                                                                                                      | 11. Date T.D. Reached<br>7-20-93                       | 12. Date Complet. (Ready to Prod.)<br>8-22-93 | 13. Elevations (DF & RCB, RT, GR, etc.)<br>4957  | 14. Elev. Casingshead<br>4957          |
| 15. Total Depth<br>2576                                                                                                                                                                                                                          | 16. Plug Back T.D.<br>2576                             | 17. If Multiple Complet. How Many Zones?      | 18. Intervals Drilled By<br>Rotary Tools<br>0-TD | Cable Tools                            |
| 19. Producing Interval(s), of this completion - Top, Bottom, Name<br>2404 - 2476 TUBB                                                                                                                                                            |                                                        |                                               |                                                  | 20. Was Directional Survey Made<br>YES |
| 21. Type Electric and Other Logs Run<br>LOGS PREVIOUSLY SENT                                                                                                                                                                                     |                                                        |                                               |                                                  | 22. Was Well Cased<br>NO               |

CASING RECORD (Report all strings set in well)

| CASING SIZE | WEIGHT LB/FT. | DEPTH SET | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
|-------------|---------------|-----------|-----------|------------------|---------------|
| 8 5/8       | 24#           | 691       | 12 1/4    | 450 SK           | CIRC          |
| 4 1/2       | FIBERGLASS    | 2576      | 7 7/8     | 480 SK           | CIRC          |
|             |               |           |           |                  |               |
|             |               |           |           |                  |               |

| 24. LINER RECORD |     |        |              |        | 25. TUBING RECORD |           |            |
|------------------|-----|--------|--------------|--------|-------------------|-----------|------------|
| SIZE             | TOP | BOTTOM | SACKS CEMENT | SCREEN | SIZE              | DEPTH SET | PACKER SET |
|                  |     |        |              |        |                   |           |            |
|                  |     |        |              |        |                   |           |            |

|                                                                                             |                                                                                                    |
|---------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| 26. Perforation record (interval, size, and number)<br>2404-2446 2SPF 3/4"<br>2456-2476 " " | 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.<br>DEPTH INTERVAL<br>AMOUNT AND KIND MATERIAL USED |
|                                                                                             |                                                                                                    |
|                                                                                             |                                                                                                    |

PRODUCTION

|                                      |                                                                                |                                        |                         |                   |                   |                             |                 |
|--------------------------------------|--------------------------------------------------------------------------------|----------------------------------------|-------------------------|-------------------|-------------------|-----------------------------|-----------------|
| 28. Date First Production<br>8-22-93 | Production Method (Flowing, gas lift, pumping - Size and type pump)<br>FLOWING | Well Status (Prod. or Shut-in)<br>PROD |                         |                   |                   |                             |                 |
| Date of Test<br>8-22-93              | Hours Tested<br>2                                                              | Choke Size<br>2"                       | Proof's For Test Period | Oil - Bbl.<br>    | Gas - MCF<br>172  | Water - Bbl.<br>0           | Gas - Oil Ratio |
| Flow Tubing Press.<br>-              | Casing Pressure<br>360 PSI                                                     | Calculated 24-Hour Rate                | Oil - Bbl.<br>          | Gas - MCF<br>2065 | Water - Bbl.<br>0 | Oil Gravity - API - (Corr.) |                 |

|                                                                    |                                    |
|--------------------------------------------------------------------|------------------------------------|
| 29. Disposition of Gas (Sold, used for fuel, vented, etc.)<br>SOLD | Test Witnessed By<br>B.E. PRICHARD |
|--------------------------------------------------------------------|------------------------------------|

|                              |
|------------------------------|
| 30. List Attachments<br>NONE |
|------------------------------|

|                                                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------|
| 31. 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 |
| Signature <u>Billy E. Prichard</u> Printed Name <u>BILLY E. PRICHARD</u> Title <u>FIELD FOREMAN</u> Date <u>8/23/93</u>                |