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**NEW MEXICO OIL CONSERVATION COMMISSION  
WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

Form C-105  
Revised 1-1-65

**PLEASE CONSIDER THIS INFORMATION CONFIDENTIAL**

|                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                      |                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------|-------------------------|
| 1a. TYPE OF WELL                                                                                                                                                                                                                                                                                                                                                                                |                 | 5a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |                         |
| b. TYPE OF COMPLETION<br>OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/><br>NEW WELL <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/> <b>Dry - P &amp; A</b> |                 | 5. State Oil & Gas Lease No.<br><b>K-4525</b>                                                        |                         |
| 2. Name of Operator<br><b>Gulf Oil Corporation</b>                                                                                                                                                                                                                                                                                                                                              |                 | 7. Unit Agreement Name                                                                               |                         |
| 3. Address of Operator<br><b>Box 670, Hobbs, New Mexico 88240</b>                                                                                                                                                                                                                                                                                                                               |                 | 8. Farm or Lease Name<br><b>Union "B" State</b>                                                      |                         |
| 4. Location of Well<br>UNIT LETTER <b>E</b> LOCATED <b>2234</b> FEET FROM THE <b>North</b> LINE AND <b>804</b> FEET FROM THE <b>West</b> LINE OF SEC. <b>17</b> TWP. <b>31-N</b> RGE. <b>33-E</b> NMPM                                                                                                                                                                                          |                 | 9. Well No.<br><b>1</b>                                                                              |                         |
| 15. Date Spudded<br><b>3-8-70</b>                                                                                                                                                                                                                                                                                                                                                               |                 | 10. Field and Pool, or Wildcat<br><b>Wildcat</b>                                                     |                         |
| 16. Date T.D. Reached<br><b>3-18-70</b>                                                                                                                                                                                                                                                                                                                                                         |                 | 12. County<br><b>Union</b>                                                                           |                         |
| 17. Date Compl. (Ready to Prod.)<br><b>P &amp; A</b>                                                                                                                                                                                                                                                                                                                                            |                 | 18. Elevations (DF, RKB, RT, GR, etc.)<br><b>5300' GL</b>                                            |                         |
| 19. Elev. Casinghead<br><b>--</b>                                                                                                                                                                                                                                                                                                                                                               |                 | 23. Intervals Drilled By<br><b>Rotary Tools</b>                                                      |                         |
| 20. Total Depth<br><b>2855'</b>                                                                                                                                                                                                                                                                                                                                                                 |                 | 21. Plug Back T.D.<br><b>--</b>                                                                      |                         |
| 22. If Multiple Compl., How Many<br><b>--</b>                                                                                                                                                                                                                                                                                                                                                   |                 | 23. Intervals Drilled By<br><b>Rotary Tools</b>                                                      |                         |
| 24. Producing Interval(s), of this completion - Top, Bottom, Name<br><b>None - Plugged and abandoned</b>                                                                                                                                                                                                                                                                                        |                 | 25. Was Directional Survey Made<br><b>No</b>                                                         |                         |
| 26. Type Electric and Other Logs Run<br><b>BHC Sonic-Gamma Ray, Dual Ind. - Laterolog, Microlog caliper</b>                                                                                                                                                                                                                                                                                     |                 | 27. Was Well Cored<br><b>Yes - Side Wall</b>                                                         |                         |
| 28. CASING RECORD (Report all strings set in well)                                                                                                                                                                                                                                                                                                                                              |                 |                                                                                                      |                         |
| CASING SIZE                                                                                                                                                                                                                                                                                                                                                                                     | WEIGHT LB./FT.  | DEPTH SET                                                                                            | HOLE SIZE               |
| <b>8-5/8"</b>                                                                                                                                                                                                                                                                                                                                                                                   | <b>24#</b>      | <b>333'</b>                                                                                          | <b>12-1/4"</b>          |
| CEMENTING RECORD                                                                                                                                                                                                                                                                                                                                                                                |                 | AMOUNT PULLED                                                                                        |                         |
| <b>300 sacks (Circulated)</b>                                                                                                                                                                                                                                                                                                                                                                   |                 |                                                                                                      |                         |
| 29. LINER RECORD                                                                                                                                                                                                                                                                                                                                                                                |                 |                                                                                                      |                         |
| SIZE                                                                                                                                                                                                                                                                                                                                                                                            | TOP             | BOTTOM                                                                                               | SACKS CEMENT            |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                      |                         |
| 30. TUBING RECORD                                                                                                                                                                                                                                                                                                                                                                               |                 |                                                                                                      |                         |
| SIZE                                                                                                                                                                                                                                                                                                                                                                                            | DEPTH SET       | PACKER SET                                                                                           |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                      |                         |
| 31. Perforation Record (Interval, size and number)<br><b>None</b>                                                                                                                                                                                                                                                                                                                               |                 | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.                                                       |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                 | DEPTH INTERVAL                                                                                       |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                 | AMOUNT AND KIND MATERIAL USED                                                                        |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                      |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                      |                         |
| 33. PRODUCTION                                                                                                                                                                                                                                                                                                                                                                                  |                 |                                                                                                      |                         |
| Date First Production<br><b>Did not produce</b>                                                                                                                                                                                                                                                                                                                                                 |                 | 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 |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                      |                         |
| Flow Tubing Press.                                                                                                                                                                                                                                                                                                                                                                              | Casing Pressure | Calculated 24-Hour Rate                                                                              | Oil - Bbl.              |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                      |                         |
| 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 <b>[Signature]</b>                                                                                                                                                                                                                                                                                                                                                                       |                 | TITLE <b>Area Production Manager</b>                                                                 |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                 | DATE <b>April 9, 1970</b>                                                                            |                         |