

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

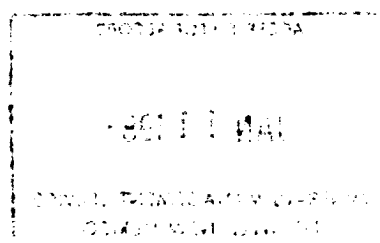
SUBMIT IN DUPLICATE

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____		12. COUNTY OR PARISH Chaves		13. STATE NM																									
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 _____		14. PERMIT NO. O. C. D.		15. DATE SPUNDED 12-1-82																									
2. NAME OF OPERATOR Yates Petroleum Corporation		16. DATE T.D. REACHED 12-10-82		17. DATE COMPL. (Ready to prod.) 12-20-82																									
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210		18. ELEV. CASINGHEAD 3744' GR		19. ELEV. CASINGHEAD																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1980 FNL & 660 FEL, Sec. 24-T6S-R25E At top prod. interval reported below At total depth		20. TOTAL DEPTH, MD & TVD 4250'		21. PLUG, BACK T.D., MD & TVD 4203'																									
5. LEASE DESIGNATION AND SERIAL NO. 88210 51829		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-4250'																									
6. IF INDIAN, ALLOTTEE OR TRIBE NAME		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3854-3954' Abo		25. WAS DIRECTIONAL SURVEY MADE No																									
7. UNIT AGREEMENT NAME		26. TYPE ELECTRIC AND OTHER LOGS RUN CNL/FDC; DLL		27. WAS WELL CORED No																									
8. FARM OR LEASE NAME Getty VQ Federal Com		28. CASING RECORD (Report all strings set in well)																											
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31. PERFORATION RECORD (Interval, size and number)																													
3854-3954' w/9 .42" holes																													
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																													
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented - Will be sold																													
35. LIST OF ATTACHMENTS Deviation Survey																													
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																													
SIGNED <u>David R. Glass</u> TITLE <u>MINERALS MANAGEMENT SERVICE SUPERVISOR</u> DATE <u>12-22-82</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 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 should be listed on this form, 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.)

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 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(s) or intervals, tops(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 26: "Proven or Contained": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: "Seals" a separate completion report on this form for each interval to be separately produced. (See instruction for Items 22 and 24 above.)

37. SUMMARY OF LOGS, ZONES:

SHOW ALL LOGS, ZONES OF POROSITY AND CONTENTS THEREOF, CORREL INTERVALS, AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVALS, TESTS, CLOSURE TESTS, TIME TOOL-LOGS, FLOWING, AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
				San Andres	540		
				Glorieta	1625		
				Abo	3638		