

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

UN. IED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/>		1b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		1c. OTHER: <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Yates Petroleum Corporation ✓		3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210		4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980 FNL & 1980 FEL, Sec. 24-T7S-R25E At top prod. interval reported below At total depth		8. FARM OR LEASE NAME Binnion TT Federal	
14. PERMIT NO.		DATE ISSUED MAR 07 1983		12. COUNTY OR PARISH Chaves		13. STATE NM	
15. DATE SPUDDED 2-3-83		16. DATE T.D. REACHED 2-9-83		17. DATE COMPL. (Ready to prod.) 2-25-83		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3652' 3GR	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 4200'		21. PLUG, BACK T.D., MD & TVD 4135'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY →		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3832-3940' Abo		25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN CNL/FDC; DLL	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)		29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 3832-3940' w/15 .42" holes		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 3832-3940' AMOUNT AND KIND OF MATERIAL USED w/1500 g. 7 1/2% acid. SF w/40000g. gel KCL wtr, 75000# 20/40 sd.		33. PRODUCTION DATE FIRST PRODUCTION 2-25-83 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) SIWOPLC		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 data		37. SIGNED [Signature] TITLE Production Supervisor		38. TEST WITNESSED BY Bill Hansen (ORIG. SGD.) DAVID R. GLASS DATE 2-28-83 MINERALS MANAGEMENT SERVICE ROSWELL, NEW MEXICO	

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, 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.

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

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

27. SUMMARY OF POROSITY ZONES:				38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				NAME	MEAS. DEPTH
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		TOP TRUE VERT. DEPTH
				San Andres Glorieta Abo	446 1532 3625