

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"/>	
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>		WORK OVER <input type="checkbox"/>		DEEP-EN <input type="checkbox"/>	
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 or Federal Survey)		At surface		2080 FSL & 2130 FEL, Sec. 3-T8S-R25E		At top prod. interval reported below	
At total depth		14. PERMIT NO.		DATE ISSUED		MAR 25 1983	
15. DATE SPUDDED		2-24-83		16. DATE T.D. REACHED		3-8-83	
17. DATE COMPL. (Ready to prod.)		3-22-83		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)		3609' JGR	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY	
4180'		4106'		23. INTERVALS DRILLED BY		ROTARY TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		3602-3966' 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)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
30"				40'			
10-3/4"		40.5#		771'		14-3/4"	
4-1/2"		9.5#		4174'		7-7/8"	
29. LINER RECORD		30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
						SCREEN (MD)	
2-3/8"		3536'		3536'		DEPTH INTERVAL (MD)	
						AMOUNT AND KIND OF MATERIAL USED	
3602-3966' w/18 .42" holes						w/2000 g. 7 1/2% acid. SF	
						w/40000 g. gel KCL wtr.	
						70000# 20/40 sd.	
33. PRODUCTION							
DATE FIRST PRODUCTION		3-22-83		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		Flowing	
DATE OF TEST		3-22-83		HOURS TESTED		3	
CHOKE SIZE		3/4"		PROD'N. FOR TEST PERIOD		OIL—BBL.	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		GAS—MCF.	
260		Packer		OIL—BBL.		WATER—BBL.	
				3955		OIL GRAVITY-API (CORR.)	
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		TITLE		Engineer	
ACCEPTED FOR RECORD		(ORIG. SGD.) DAVID R. GLASS		MAR 29 1983		TEST WITNESSED BY	
Bill Hansen		Post ID-2		4-1-83		Comp + BH	
MINERALS MANAGEMENT SERVICE		ROSWELL, NEW MEXICO		DATE		3-23-83	

*** (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 37.

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: "Sacks Content": 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.)

37. SUMMARY OF POROSITY ZONES:			38. GEOLOGIC MARKERS		
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TESTED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES					
FORMATION	TOP	BOTTOM	NAME	TOP	
				MEAS. DEPTH	TRUE VERT. DEPTH
			San Andres	475	
			Glorieta	1440	
			Abo	3573	