

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☐	DRY ☒	Other ☐		
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐
2. NAME OF OPERATOR Marbob Energy Corporation ✓						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Drawer 217, Artesia, N.M. 88210						8. FARM OR LEASE NAME ARCO Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 330 FSL & 330 FEL At top prod. interval reported below Same At total depth Same						9. WELL NO. 1	
14. PERMIT NO.						12. COUNTY OR PARISH Eddy	
DATE ISSUED JUL 1 1982 O. C. D. ARTESIA, OFFICE						13. STATE N.M.	
15. DATE SPUDDED 8/13/81		16. DATE T.D. REACHED 8/18/81		17. DATE COMPL. (Ready to prod.) Dry		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3511' GR	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 2025'		21. PLUG, BACK T.D., MD & TVD 1989'		22. IF MULTIPLE COMPLEMENTS HOW MANY*	
23. INTERVALS DRILLED BY 0-2025'		24. PRODUCING INTERVAL(S) OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* Dry		25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma ray neutron	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 5/8"		24#		204'		12 1/4"	
4 1/2"		10.50#		2021'		7 7/8"	
CEMENTING RECORD		AMOUNT PULLED					
125 sax		None					
675 sax		None					
29. LINER RECORD		30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SIZE	
None						None	
DEPTH SET (MD)		PACKER SET (MD)		31. PERFORATION RECORD (Interval, size and number) Attached			
				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. Attached			
				33. PRODUCTION DATE FIRST PRODUCTION Dry PRODUCTION METHOD (Flooding, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in) Dry			
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
OIL—BBL.		GAS—MCF		WATER—BBL.		GAS-OIL RATIO	
FLOW, TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		35. LIST OF ATTACHMENTS Deviation survey, gamma ray neutron logs		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED		TITLE Production Clerk		DATE 6/17/82		ACCEPTED FOR RECORD JUL 30 1982 U.S. GEOLOGICAL SURVEY ROSWELL, NEW MEXICO	

*(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, 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 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.)

37. SUMMARY OF POROUS 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 USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			NAME	TOP	
FORMATION	TOP	BOTTOM		MEAS. DEPTH	TRUE VERT. DEPTH

STEWART BROTHERS DRILLING CO. - BEST RECORD

Client: MARBOS ENERGY

Well #: ARCO FEDERAL # 1

ARC0 FEDERAL #1

[illegible]

CERTIFICATION

Pusher

Appeared before me this date to
certify and affirm the above to
be a true and accurate record.

Date _____

Notary