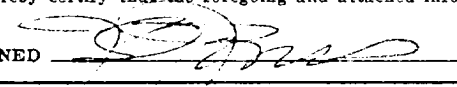


UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYNMOCC COPY  
SUBMIT IN DUPLICATE(See o. i.  
struction on  
reverse side)Form approved.  
Budget Bureau No. 42-R355.5.

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

|                                                                                                                                                                                                                                                                             |                                      |                                                                      |                                    |                                                     |                                                 |                         |               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------------|------------------------------------|-----------------------------------------------------|-------------------------------------------------|-------------------------|---------------|
| 1a. TYPE OF WELL:                                                                                                                                                                                                                                                           |                                      | OIL WELL <input type="checkbox"/>                                    | GAS WELL <input type="checkbox"/>  | DRY <input checked="" type="checkbox"/>             | Other _____                                     |                         |               |
| b. TYPE OF COMPLETION:                                                                                                                                                                                                                                                      |                                      |                                                                      |                                    |                                                     |                                                 |                         |               |
| NEW WELL <input type="checkbox"/>                                                                                                                                                                                                                                           | WORK OVER <input type="checkbox"/>   | DEEP-EN <input type="checkbox"/>                                     | PLUG BACK <input type="checkbox"/> | DIFF. RESVR. <input type="checkbox"/>               | Other _____ P&A                                 |                         |               |
| 2. NAME OF OPERATOR<br>Atlantic Richfield Company                                                                                                                                                                                                                           |                                      |                                                                      |                                    |                                                     |                                                 |                         |               |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 1710, Hobbs, New Mexico 88240                                                                                                                                                                                                           |                                      |                                                                      |                                    |                                                     |                                                 |                         |               |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)<br>At surface 1825' FSL & 2220' RECEIVED D. S. GEOLOGICAL SURVEY ARTESIA, NEW MEXICO<br>At top prod. interval reported below as above<br>At total depth as above<br>JAN 17 1978 |                                      |                                                                      |                                    |                                                     |                                                 |                         |               |
| 14. PERMIT NO.                                                                                                                                                                                                                                                              |                                      | DATE ISSUED                                                          |                                    |                                                     |                                                 |                         |               |
| O. C. C. OFFICE                                                                                                                                                                                                                                                             |                                      |                                                                      |                                    |                                                     |                                                 |                         |               |
| 15. DATE SPUDDED<br>10/29/77                                                                                                                                                                                                                                                | 16. DATE T.D. REACHED<br>12/7/77     | 17. WELL COMPL. (Ready to prod.)<br>Dry hole - P&A                   |                                    | 18. ELEVATIONS (DF, REB, RT, GR, ETC.)*<br>3527' GR | 19. ELEV. CASINGHEAD                            |                         |               |
| 20. TOTAL DEPTH, MD & TVD<br>11,065'                                                                                                                                                                                                                                        | 21. PLUG, BACK T.D., MD & TVD<br>P&A | 22. IF MULTIPLE COMPL., HOW MANY*                                    | 23. INTERVALS DRILLED BY<br>→      | ROTARY TOOLS<br>0-11,065'                           | CABLE TOOLS                                     |                         |               |
| 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*<br>None                                                                                                                                                                                       |                                      |                                                                      |                                    |                                                     | 25. WAS DIRECTIONAL SURVEY MADE<br>No           |                         |               |
| 26. TYPE ELECTRIC AND OTHER LOGS RUN<br>CNL-Den, DLL w/RXO, BHC Sonic logs                                                                                                                                                                                                  |                                      |                                                                      |                                    |                                                     | 27. WAS WELL CORED<br>No                        |                         |               |
| 33.* PRODUCTION                                                                                                                                                                                                                                                             |                                      |                                                                      |                                    |                                                     |                                                 |                         |               |
| DATE FIRST PRODUCTION<br>Dry Hole                                                                                                                                                                                                                                           |                                      | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) |                                    |                                                     | WELL STATUS (Producing or shut-in)<br>P&A - Dry |                         |               |
| DATE OF TEST                                                                                                                                                                                                                                                                | HOURS TESTED                         | CHOKE SIZE                                                           | PROD'N. FOR TEST PERIOD<br>→       | OIL—BBL.                                            | GAS—MCF.                                        | WATER—BBL.              | GAS-OIL RATIO |
| FLOW. TUBING PRESS.                                                                                                                                                                                                                                                         | CASING PRESSURE                      | CALCULATED 24-HOUR RATE<br>→                                         | OIL—BBL.                           | GAS—MCF.                                            | WATER—BBL.                                      | OIL GRAVITY-API (CORR.) |               |
| 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)                                                                                                                                                                                                                  |                                      |                                                                      |                                    |                                                     | TEST WITNESSED BY<br>Dean McDaniel              |                         |               |
| 35. LIST OF ATTACHMENTS<br>Logs as listed in item 26 above, DST & Inclination Report                                                                                                                                                                                        |                                      |                                                                      |                                    |                                                     |                                                 |                         |               |
| 36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records                                                                                                                                           |                                      |                                                                      |                                    |                                                     |                                                 |                         |               |
| SIGNED                                                                                                                                                                                   |                                      | TITLE Dist. Dir. Supt.                                               |                                    | DATE 1/12/78                                        |                                                 |                         |               |

\*(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:<br>SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING<br>DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES |       |        |                                                                                                                                                                                                                                                                                                                                                                                                                         | 38. GEOLOGIC MARKERS                                                   |             |                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------|-----------------------------------------------------------------|
| FORMATION                                                                                                                                                                                                                                             | TOP   | BOTTOM | DESCRIPTION, CONTENTS, ETC.                                                                                                                                                                                                                                                                                                                                                                                             | NAME                                                                   | MEAS. DEPTH | TRUE VERT. DEPTH                                                |
| Abo                                                                                                                                                                                                                                                   | 6355' | 6415'  | DST #1. TO w/strong blow, cont'd thruout no gas to surf. Closed tool 8:07 am for 1 hr ISIP. Reop tool @ 9:10 am for 1 hr flow period, op w/good blow, decr to 0. No gas to surf. Closed tool @ 9:10 am for 1 1/2 hr SIP. Rec 4318' 8.6# gel slightly gas cut sulphur wtr. IHP 2871, IFP 825-1691, ISIP 2005, FFP 1741-2005, FSIP 2005, FHP 2858, resumed drlg @ 8:00 pm 11/19/77. Fin drlg to 7340' @ 2:10 pm 11/22/77. | Abo<br>Wolfcamp<br>Cisco<br>Strawn<br>Atoka<br>Morrow<br>Mississippian |             | 6118'<br>7210'<br>9020'<br>10016'<br>10284'<br>11690'<br>11004' |
| Wolfcamp                                                                                                                                                                                                                                              | 7295' | 7340'  | DST #2. TO @ 5:25 am 11/23/77 for 1/4 hr preflow. Op tool w/weak blow, incr to good blow. No gas to surf. Closed tool @ 5:40 am for 1 hr SI. Reop tool @ 6:40 am. TO w/weak blow, incr to good blow. No gas to surf. Shut tool @ 8:40 am for 4 hr FSI. Rec 15' oil & 2882' salt wtr. No FSIP. IHP 3335, IFP 135-236, ISIP 2595, FFP 273-1290, FSIP, no record. FHP 3335.                                                |                                                                        |             |                                                                 |

(cont'd on attached page #2.)

Form 9-330

F. M. Robinson Fed Com #1

1/12/78

| <u>Formation</u> | <u>Top</u> | <u>Bottom</u> | <u>Description</u>                                                                                                                                                                                                                                                                                                                                                                   |
|------------------|------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Morrow           | 11,080'    | 10,758'       | DST #3. TO @ 10:40 am 12/9/77 for 15 min IFP, fair blow. Closed tool @ 10:55 am for 1½ hr FSIP. Rel pkr @ 2:30 pm. Rec 436' DM, Temp 155°. IHP 5452, IFP 382-319, ISIP 597, FFP 306-370, FSIP 509, FHP 5452.                                                                                                                                                                         |
| Wolfcamp         | 8710'      | 8800'         | DST #4. Set straddle pkrs. TO @ 7:03 am 12/10/77 for 15 min IFP, fair blow in 2 mins. Closed tool @ 7:18 am for 1 hr SIP 5-10# max. TO @ 8:18 am for 1 hr FFP. Closed tool @ 9:18 am for 3 hr FSIP. Rel pkrs @ 12:58 pm & POH. Rec 10' oil, 40.2° @ 60° & 390' oil & gas cut drlg mud (5% oil, 40% gas). Temp 132°. IHP 4261, IFP 36-62, ISIP 3144, FFP 74-125, FSIP 2751, FHP 4261. |

WELL NAME AND NUMBER F. 1 Robinson Com. #1LOCATION 1825' FSL & 2220' FWL Section 27, T-17-S, R-29-E  
(Give Unit, Section, Township and Range)

RECEIVED

JAN 13 1978

OPERATOR Atlantic Richfield CompanyDRILLING CONTRACTOR McVay Drilling CompanyU. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well and that he has conducted deviation tests and obtained the following results:

| <u>Degrees @ Depth</u> | <u>Degrees @ Depth</u> | <u>Degrees @ Depth</u> |
|------------------------|------------------------|------------------------|
| <u>1/2° 110</u>        | <u>3/4° 3750</u>       | <u>1/2° 8264</u>       |
| <u>1° 207</u>          | <u>1 1/4° 4050</u>     | <u>3/4° 8554</u>       |
| <u>1/2° 363</u>        | <u>1° 4344</u>         | <u>3/4° 8852</u>       |
| <u>1/2° 598</u>        | <u>1° 4658</u>         | <u>1 3/4° 9450</u>     |
| <u>1° 725</u>          | <u>1 1/4° 4879</u>     | <u>1 1/4° 9830</u>     |
| <u>1 3/4° 826</u>      | <u>1° 5193</u>         | <u>1/4° 10,120</u>     |
| <u>1° 1065</u>         | <u>1 1/2° 5538</u>     | <u>3/4° 11,050</u>     |
| <u>1 1/4° 1254</u>     | <u>1 1/2° 5822</u>     |                        |
| <u>3/4° 1784</u>       | <u>1 1/4° 6134</u>     |                        |
| <u>3/4° 2095</u>       | <u>1 1/2° 6415</u>     |                        |
| <u>3/4° 2313</u>       | <u>1° 6730</u>         |                        |
| <u>3/4° 2594</u>       | <u>3/4° 7044</u>       |                        |
| <u>3/4° 2873</u>       | <u>3/4° 7340</u>       |                        |
| <u>3/4° 3165</u>       | <u>1° 7640</u>         |                        |
| <u>3/4° 3543</u>       | <u>1/2° 7952</u>       |                        |

Drilling Contractor McVay Drilling CompanyBy: Jim McVaySubscribed and sworn to before me this 22 day of December, 1977Alta E. James  
Notary PublicMy Commission Expires: August 15, 1981Lea County New Mexico