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1539-1675' W/33 0.45" shots DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED 1543-1674' A/C W/3000g 15% reg acid 1543-1674' A/C W/3000g 15% reg acid 1539-1675 60000g treated wtr. & 100000# 20-40 sand 100000# 20-40 sand 3. PRODUCTION Dete First Production Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Frod. or Shut-in) 3-2-76 Pumped Producing Date of Test Hows Tested Choke Size Prod'n. For Test Period Oil - Ebl. Gas - MCF Water - Ebl. Gas-0il Ratio 3-12-76 24 Casting Pressure Calculated 24- 0il - Bbl. Gas - MCF Water - Ebl. Gas-0il Ratio 32 17.2 28.0 12.2 BLN 1630/1 32 17.2 28.0 12.2 BLN 39.1 4. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold Bill Trenabley, Jr. 5. List of Attachments Deviation Survey enclosed Bill Trenabley, Jr. 6. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.		·						<u> </u>			
1539-1675' W/33 0.45" shots 1543-1674' A/C w/3000g 15% reg acid 1539-1675' W/33 0.45" shots 1543-1674' A/C w/3000g 15% reg acid 1539-1675 60000g treated wtr. & 1000004# 20-40 sand 1000004# 20-40 sand 3. PRODUCTION Pate First Production Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in) 3-2-76 Pumped Producting 3-12-76 24 Coke Size Prod'n. For 3-12-76 24 Calculated 24- 011 - Bbl. Gas - MCF Water - Bbl. Gas-011 Ratio 32 32 17.2 28.0 12.2 BLV 1630/1 32 32 17.2 28.0 12.2 BLV 39.1 4. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold Bill Trenabley, Jr. 5. List of Attachments Deviation Survey enclosed Bill Trenabley, Jr. 6. Thereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.	31. Perforation Record (Interval, size and	d number)			32.	ACID, SHOT	, FRACTURE	, CEMENT SQ	UEEZE, ETC.	
15 15 1071 N/ 50 N/ 5000 g treated wtr. & 1539-1675 60000 g treated wtr. & 1539-1675 60000 g treated wtr. & 100000# 20-40 sand 3. PRODUCTION Well Status (Prod. or Shut-in) Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in) Producting Production State and type pump) Well Status (Prod. or Shut-in) Producting Producting Producting Out of Test Hours Tested 17.2 28.0 12.2 BLV 1630/1 Test Witnessed By Bill Treatbley, Jr. Sold Test Witnessed By Bill Treatbley, Jr. Sold Test Witnessed By Bill Treatbley, Jr. Sold Sold </td <td>1520 1675</td> <td>1 1/22 0</td> <td>15" chota</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	1520 1675	1 1/22 0	15" chota								
I DODOD# 20-40 sand PRODUCTION PRODUCTION Well Status (Prod. or Shut-in) Production Method (Flowing, gas lift, pumping – Size and type pump) Well Status (Prod. or Shut-in) Production Oute of Test Hours Tested Choke Size Prod'n. For Off – Bbl. Gas – MCF Water – Bbl. Off Gas – MCF Sold	1009-1070	M/35 U.	45 5000	5		1543-	1674	A/C ·	w/3000g	<u>15% reg acid</u>	
PRODUCTION 3. PRODUCTION Oute First Production Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in) 3-2-76 Pumped Producting Producting 3-2-76 Pumped Gas - MCF Water - Bbl. Gas - OII Ratio 3-12-76 24 Test Period 17.2 28.0 12.2 BLV 1630/1 "low Tubing Press. Casing Pressure Calculated 24- OII - Bbl. Gas - MCF Water - Bbl. OII Gravity - API (Corr.) 32 32 17.2 28.0 12.2 BLV 39.1 4. Disposition of Gas (Sold, used for fuel, vented, etc.) Test Witnessed By Bill Trenabley, Jr. 5. List of Attachments Deviation Survey enclosed Bill Trenabley, Jr. 6. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.						1539-	1675	6000	Og trea	ted wtr. &	
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3-12-76 24 17.2 28.0 12.2 BL/V 1630/1 'low Tubing Press. Casing Pressure Calculated 24- 011 - Bbl. Gas - MCF Water - Bbl. Oil Gravity - API (Corr.) 32 32 17.2 28.0 12.2 BL/V 39.1 4. Disposition of Gas (Sold, used for fuel, vented, etc.) 17.2 28.0 12.2 BL/V 39.1 Sold Sold Test Witnessed By Bill Trenabley, Jr. Sold Deviation Survey enclosed Gat while information shown on both sides of this form is true and complete to the best of my knowledge and belief.	Date of Test	Hours Tested		Prod'n.		Oil - Bbl.	Gas	MCF Wa	ter - Bbl.	Gas—Oil Ratio	
Clow Tubing Press. Casing Pressure Calculated 24- 011 - Bbl. Gas - MCF Water - Bbl. Oil Gravity - API (Corr.) 32 32 17.2 28.0 12.2 BLV 39.1 4. Disposition of Gas (Sold, used for fuel, vented, etc.) Test Witnessed By 39.1 5. List of Attachments Deviation Survey enclosed Bill Trenabley, Jr. 6. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.	3-12-76	24		Test P	eriod	17.2	2	8.0	12.2 BL	1630/1	
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Sold Bill Trembley, Jr. Bill Trembley, Jr. Bill Trembley, Jr. Deviation Survey enclosed 16. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.	32	32	Hour Hate	▶ 17.	2	28.0		12.2	BLW	39.1	
5. List of Attachments Deviation Survey enclosed 16. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.	34. Disposition of Gas (Sold, used for fu	el, vented, etc.)					Te	st Witnessed i	Ву	
5. List of Attachments Deviation Survey enclosed 16. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.								В	ill Tre	mbley, Jr.	
Deviation Survey enclosed 6. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.											
16. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.		ation Sur	vev enclo	osed		•					
					form is tri	ie and comple	te to the bes	t of my knowle	dge and belie	f.	
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SIGNED ARISHING FORMUNSON TITLE OCCUP. DATE DATE	(/ /	A-	Le D.	. 1	(Seol 🤉	octv			3-16-76	
	SIGNED -A	sistena	<u>romun</u>	Sontri	TLE		<u> </u>		DATE		

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

т.	Anhy	T.	Canyon	Τ.	Ojo Alamo	Т.	Penn. "B"
т.	Salt	T.	Strawn	Т.	Kirtland-Fruitland	T.	Penn. "C"
В.	Salt	Т.	Atoka	Т.	Pictured Cliffs	T.	Penn. "D"
T.	Yates	T.	Miss	Т.	Cliff House	т.	Leadville
т.	7 Rivers	T,	Devonian	T.	Menefee	Т.	Madison
Т.	Queen	T.	Silurian	т.	Point Lookout	т.	Elbert
T.	Grayburg	T.	Montoya	Т.	Mancos	T.	McCracken
Т.	San Andres <u>896</u>	T.	Simpson	Т.	Gallup	r.	Ignacio Qtzte
					se Greenhorn		
Т.	Paddock	Т.	Ellenburger	Т.	Dakota	Т.	
Т.	Blinebry	Т.	Gr. Wash	Т.	Morrison	т.	
T.	Tubb	Т.	Granite	Т.	Todilto	Т.	
т.	Drinkard	Т.	Delaware Sand	Т.	Entrada	Т.	· · · · · · · · · · · · · · · · · · ·
т.	Abo	Т.	Bone Springs	т.	Wingate	Т.	
Т.	Wolfcamp	Т.		Т.	Chinle	Т.	
T.	Penn.	Т.		Т.	Permian	Т.	
т	Cisco (Bough C)	Т.		Т.	Penn. "A"	Т.	91-1

FORMATION RECORD (Attach additional sheets if necessary)

From	То	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
1	287	287	Surface & gravel				
87	376	89	Red bed and shells				
376	730	354	Red bed				
730	888	158	Lime and hard sand				
888	988	100	Lime, shell & anhy				
988	1230	242	Lime				
1230	178:	553	Lime and sand				
1783	1890	167	Lime				
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Yates Petroleum Corporation -----71, WELL # 1 Eddy County, New Mexico

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		RECORD OF	INCLINATIO	N			
=11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Annumulative Distilanement (feet)		
376	3.76	1/4	.44	1.65	1.65		
850	4.74	1/2	.87	4.12	1 5.77		
1230	3.80	1 1/4	2.18	8.28	1 14.05		
1783	5.53	1 1/2	2.62	14.49	28.54		
1890	1.07	1 1/2	2.62	2.80			
				2.00	31.34		
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If additional spa	ce is needed, use the r	everse side of this form	1.				
17. Is any information	on shown on the reverse	e side of this form?	🗋 yes 🛣 no)			
18. Accumulative to	al displacement of well	I bore at total depth of	1890	feet = 31	.34 feet.		
*19. Inclination meas	urements were made in	- Tubing			XX. D. H. D.		
20. Distance from su	rface location of well	to the nearest lease line	,		Tel Sum Sube		
21. Minimum distanc	e to lease line as pres	cribed by field rules			leet.		
22. Was the subject	well at any time intent	ionally deviated from the	e vertical in any manne		feet.		
(If the answer to	the above question is	"yes", attach written e	xplanation of the circu	mstances.)			
autorized to make this inclination data and fac data and facts are true, This certification cover numbers on this form,	alties prescribed in Article certification, that I have its placed on both sides c correct, and complete to rs all data as indicated b	e 6036c, R.C.S., that I am personal knowledge of the of this form and that such the best of my knowledge, y asterlsks (*) by the item	OPERATOR CERTIFICATION I declare under penalties prescribed in Article 505-4. R C S., that I am authorized to make this certification, that I have personal kni wiedge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the test of my know- ledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) in the instrumenter on this form.				
Signature of Authorized I. W. Lovelad	Representative	<u>/</u>	Signature of Authorized	l Representative			
Name of Person and Tit							
Byrd Drilling			Name of Person and Ti	tle (type or print)			
Name of Company		· · · · · · · · · · · · · · · · · · ·	Operator				
Telephone: 1-915 Area Code	563-2023	·	Telephone:	•			
Area Code			Area Cod	le			