

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.6.

CSF

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

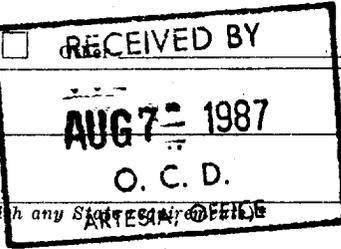
1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____

b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESVR

2. NAME OF OPERATOR
Fred Pool Drilling, Inc.

3. ADDRESS OF OPERATOR
P.O. Box 1393, Roswell, N.M. 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State or Federal regulations)
At surface 1650 FSL & 990 FWL
At top prod. interval reported below
At total depth



5. LEASE DESIGNATION AND SERIAL NO.

NM 42410

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Comstock Federal

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Artesia, Qn-GB-SA

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 12-18S-27E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

15. DATE SPUNDED 10-10-86 16. DATE T.D. REACHED 11-22-86 17. DATE COMPL. (Ready to prod.) never 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3579 Gr 19. ELEV. CASINGHEAD 3579'

20. TOTAL DEPTH, MD & TVD 2000' 21. PLUG, BACK T.D., MD & TVD N A 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 24. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* None 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN LPN 27. WAS WELL CORED NO

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#	350'	12 1/4	300 sx Class C - circ. 35 sx.	0

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

None- Completion was not attempted on this well.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.* PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump) WELL STATUS (Producing or shut-in)

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL--BBL.	GAS--MCF.	WATER--BBL.	GAS-OIL RATIO

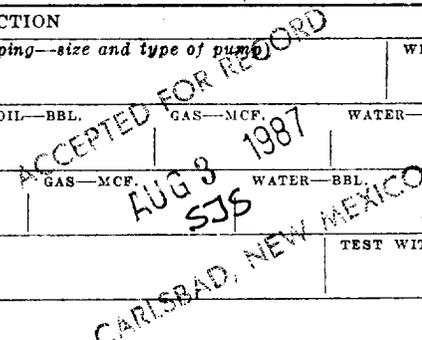
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY

35. LIST OF ATTACHMENTS

LPN log

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Fred Pool TITLE Petroleum Engineer DATE 7-29-87



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 29, 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: "Sack's 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.)

FORMATION		DEPTH INTERVAL, THICKED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		DESCRIPTION, CONTENTS, ETC.	38.	GEOLOGIC MARKERS	TOP	
TOP	BOTTOM	MEAS. DEPTH	TRUE VERT. DEPTH				NAME	MEAS. DEPTH
	0	80		Caliche, red bed				
	80	995		Red bed, salt				
	995	1310		anhydrite, red sand stone				
Queen	1310	1332		sandy dolomite				
	1332	1440		dolomite				
	1440	1460		sandy dolomite				
Pentrose	1460	2000		limestone and dolomite with streaks of sandy shale. TD				