

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

5. LEASE DESIGNATION AND SERIAL NO.

LC-061701

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

Ballard GB-SA Unit

8. FARM OR LEASE NAME

BGSA Unit, Tract #14

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Loco Hills Qn-GB-SA

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

8, T18S, R29E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

15. DATE SPUNDED

2-23-97

16. DATE T.D. REACHED

3-2-97

17. DATE COMPL. (Ready to prod.)

3-18-97

18. ELEVATIONS (DF, REB, RT, OR, ETC.)*

3530' GR

19. ELEV. CASINGHEAD

3528'

20. TOTAL DEPTH, MD & TVD

3165' KB

21. PLUG, BACK T.D., MD & TVD

3114' KB

22. IF MULTIPLE COMPL., HOW MANY*

N/A

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

10-3165'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

2789' - 3043' San Andres zone

No

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Litho-Density Compensated Neutron GR, Dual Laterolog Micro SFL

27. WAS WELL CORED

No

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

GR

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT FULLED
8 5/8"	23# WC-50	360' KB	12 1/4"	420 sx Circ	--
5 1/2"	15.5# WC-50	3160' KB	7 7/8"	960 sx Circ	--

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	2784'	

31. PERFORATION RECORD (Interval, size and number)

2789	2829	2968	3016
2793	2915	2969	3035 1/2" Dia. Holes
2807	2937	2989	3043
2821	2939	3001	
2827	2954	3006	18 Holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2789 - 3043	3500 Gal 15% HCL.
2789 - 3043	Fracced w/36,250 Gals 25 PPG
	Delta Frac w/10,000# sand
	in 6 stages.

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
3-18-97		Pumping - 2 x 1½ x 16 RWTC				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4-15-97	24	--	→	14	2	215	142.8
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
		→	ACCT				37.2

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

Sold

35. LIST OF ATTACHMENTS

Litho-Density Compensated Neutron Gamma Ray, GR/CCL Log, Dual Laterolog Micro SFL Gamma

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

SIGNED

Edward J. Keith

TITLE

Field Foreman

DATE 04-15-97

*(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: 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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Queen Grayburg San Andres	1920 2267 2663	2267 2663	Sandstone & Dolomite Dolomite & Anhydrite & Shale Dolomite & Sandstone & Anhydrite	Top of Salt Base of Salt Yates 7 Rivers Queen Grayburg San Andres	334 827 1214 1674 1920 2267 2663	