35. LIST OF ATTACHMENTS

SUBMIT IN DUPLICA'. Form approved. Budget Bureau No. 42-R355.5. UNITED STATES (See other in-DEPARTMENT OF THE INTERIOR structions on reverse side) 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY LC-065680 6. IF INDIAN, ALLOTTEE OR TRIBE NAME WELL COMPLETION OR RECOMPLETION REPORT AND LOG* 1a. TYPE OF WELL: OIL WELL 7. UNIT AGREEMENT NAME Other b. TYPE OF COMPLETION: DEEP-PLUG BACK DIFF. RESVR. WELL X S. FARM OR LEASE NAME Other 2. NAME OF OPERATOR Keohane Federal 9. WELL NO. Westall \Mask 3. ADDRESS OF OPERATOR P.O. Drawer 1477, Roswell New Mexico 88201 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements). 40. FIELD AND POOL, OR WILDCAT Shugart 2,310' From North Line and 330' From West Line 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA At top prod. interval reported below 25 - 18S - 31E At total depth 14. PERMIT NO. 12. COUNTY OR 13. STATE PARISH Eddy New Mexico 15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 19. ELEV. CASINGHEAD 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3668 Gr. 5/31/79 Dry Hole 20. TOTAL DEPTH. MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL. 23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS HOW MANY 4200**'** Χ 25. WAS DIRECTIONAL SURVEY MADE 24. PRODUCING INTERVAL(S), OF THIS COMPLETION -- TOP, BOTTOM, NAME (MD AND TVD)* Yes 26. TYPE ELECTRIC AND OTHER LOGS RUN 27. WAS WELL CORED Dual Laterolog and Sidewall Neutron Gamma Ray 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" 20# 225 Scks to Circ. 650 77 Approx. 4000 -778 Approx. none 300 ~X 20 2290 9,5 4000 LINER RECORD 30. TUBING RECORD TOP (MD) BOTTOM (MD) SACKS CEMENT PACKER SET (MD) SIZE SCREEN (MD) SIZE DEPTH SET (MD) 31. PERFORATION RECORD (Interval, size and number) ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. AMOUNT AND KIND OF MATERIAL USED DEC 31 1979 U.S. GEOLOGICAL SURVEY ARTESIA, NEW MEXICO R+F 33.* PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or Dry Hole Dry Hole None DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD OIL-BBL. GAS-OIL RATIO GAS-MCF N/A N/A N/A N/A N/A FLOW. TURING PRESS CASING PRESSURE CALCULATED 24-HOUR RATE ALCULATED -BBL OIL GRAVITY-API (CORR.) GAS--MCF WATER-BBL. N/A N/A N/A N/A N/A 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY

(Agent) Co-Owner

12/28/79

DATE

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

TITLE