

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

5. LEASE DESIGNATION AND SERIAL NO.

LC-050797

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

FARM OR LEASE NAME

Hills-Federal

9. WELL NO.

46

10. FIELD AND POOL, OR WILDCAT

Russell

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

Sec: 12, T.20S, R.28E.
NMFM

12. COUNTY OR
PARISH

Fiddly

13. STATE

N.M.

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (<i>Ready to prod.</i>)	18. ELEVATIONS (DE. RKB. RT. GR. ETC.)*	19. ELEV. CASINGHEAD
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11-4-71	12-15-71	1-3-72	3255 Gr
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20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS ROTARY TOOLS	CABLE TOOLS
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24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) * None None → 0' - 864' 25. WAS DIRECTION

Russell band 846' to 862'

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

28 **None** **None**

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7" OD	17#	178'	8 5/8	15 sacks	
5 1/2" OD	14#	842'	6 5/8	50 sacks	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
		None					

31. PERFORATION RECORD (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	842 to 846	shot 7/43 qts nitroglycerine

33. • PRODUCTION

PRODUCTION		
DATE FIRST PRODUCTION	PRODUCTION METHOD (<i>Flowing, gas lift, pumping—size and type of pump</i>)	WELL STATUS (<i>Producing or</i>

1-3-72 pumping 1 3/4" common working bolts. shut-in) producing

DATE OF TEST	HOURS TESTED	CHOKES SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
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1-21-72	24	TEST PERIOD →	8 bbls	150 bbls
FLOW, TUBING PRESS	CASING PRESSURE	CALCULATED		

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
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[illegible]

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	8	150	TEST WITNESSED BY
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35. LIST OF ATTACHMENTS None J. Roy Gibbs

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

SIGNED [Signature] TITLE President DATE 2-1-72

(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. 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.

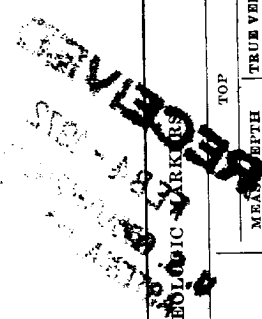
Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

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.)

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.



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	MEAN DEPTH	TRUE VERT. DEPTH
Russell	0 206 610 819 821 839 842 862	206 610 819 821 839 842 862 864 TD	gyp & sand & red beds shale broken lime sand sandy lime hard lime sand lime	Top Yates	813'	same