

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Form approved.  
Budget Bureau No. 1004-0137  
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

|                                                                                                                                   |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
|-----------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|----------------------------------------------|-----------------------------------|-----------------------------------------------|--------------------------------------------------|--------------------------------|-------------------------------------------------------------------------------|--|------------------------------------------------|--|----------------------------------|--|-----------------|--|
| 1a. TYPE OF WELL:                                                                                                                 |  | OIL WELL <input type="checkbox"/>                                    | GAS WELL <input checked="" type="checkbox"/> | DRY <input type="checkbox"/>      | Other <input type="checkbox"/>                |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| b. TYPE OF COMPLETION:                                                                                                            |  | NEW WELL <input type="checkbox"/>                                    | WORK OVER <input type="checkbox"/>           | DEEP-EN <input type="checkbox"/>  | PLUG BACK <input checked="" type="checkbox"/> | DIFF. RESVR. <input checked="" type="checkbox"/> | Other <input type="checkbox"/> |                                                                               |  |                                                |  |                                  |  |                 |  |
| 2. NAME OF OPERATOR                                                                                                               |  | YATES PETROLEUM CORPORATION                                          |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 3. ADDRESS OF OPERATOR                                                                                                            |  | 105 South 4th St., Artesia, NM 88210                                 |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)                                       |  | At surface 600' FNL & 1750' FWL, Sec. 17-21S-22E                     |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| At top prod. interval reported below                                                                                              |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| At total depth                                                                                                                    |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 14. PERMIT NO.                                                                                                                    |  | API #30-015-24002                                                    |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| DATE ISSUED                                                                                                                       |  | AUG - 4 1992                                                         |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 5. LEASE DESIGNATION AND SERIAL NO.                                                                                               |  | NM 14459                                                             |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                                                                              |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 7. UNIT AGREEMENT NAME                                                                                                            |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 8. FARM OR LEASE NAME                                                                                                             |  | Mescal SE Federal                                                    |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 9. WELL NO.                                                                                                                       |  | 1                                                                    |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 10. FIELD AND POOL, OR WILDCAT                                                                                                    |  | Undesignated Canyon                                                  |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 11. SEC., T., R., N., OR BLOCK AND SURVEY OR AREA                                                                                 |  | Unit C, Sec. 18-T21S-R22E                                            |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 12. COUNTY OR PARISH                                                                                                              |  | Eddy                                                                 |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 13. STATE                                                                                                                         |  | NM                                                                   |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 15. DATE STUDDER RECOMPLETION                                                                                                     |  | 16. DATE T.D. REACHED                                                |                                              | 17. DATE COMPL. (Ready to prod.)  |                                               | 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*          |                                | 19. ELEV. CASINGHEAD                                                          |  |                                                |  |                                  |  |                 |  |
| 7-8-92                                                                                                                            |  | -                                                                    |                                              | 7-15-92                           |                                               | 4420' GR                                         |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 20. TOTAL DEPTH, MD & TVD                                                                                                         |  | 21. PLUG, BACK T.D., MD & TVD                                        |                                              | 22. IF MULTIPLE COMPL., HOW MANY* |                                               | 23. INTERVALS DRILLED BY                         |                                | 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* |  |                                                |  |                                  |  |                 |  |
| 8500'                                                                                                                             |  | 7595'                                                                |                                              |                                   |                                               | Pulling Unit                                     |                                | 5872-6030' Canyon                                                             |  |                                                |  |                                  |  |                 |  |
| 25. WAS DIRECTIONAL SURVEY MADE                                                                                                   |  | No                                                                   |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 26. TYPE ELECTRIC AND OTHER LOGS RUN                                                                                              |  | None for recompletion                                                |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 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                                  |  |                                  |  |                 |  |
| 13-3/8"                                                                                                                           |  | 54.5#                                                                |                                              | 359'                              |                                               | 17 1/2"                                          |                                | 625 sx (in place)                                                             |  |                                                |  |                                  |  |                 |  |
| 9-5/8"                                                                                                                            |  | 32#                                                                  |                                              | 1800'                             |                                               | 12 1/2"                                          |                                | 950 sx (in place)                                                             |  |                                                |  |                                  |  |                 |  |
| 5-1/2"                                                                                                                            |  | 15.5 & 17#                                                           |                                              | 8500'                             |                                               | 7-7/8"                                           |                                | 1435 sx (in place)                                                            |  |                                                |  |                                  |  |                 |  |
| 29. LINER RECORD                                                                                                                  |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  | 30. TUBING RECORD                              |  |                                  |  |                 |  |
| SIZE                                                                                                                              |  | TOP (MD)                                                             |                                              | BOTTOM (MD)                       |                                               | SACKS CEMENT*                                    |                                | SCREEN (MD)                                                                   |  | SIZE                                           |  | DEPTH SET (MD)                   |  | PACKER SET (MD) |  |
|                                                                                                                                   |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  | 2-7/8"                                         |  | 5819'                            |  | 5819'           |  |
| 31. PERFORATION RECORD (Interval, size and number)                                                                                |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. |  |                                  |  |                 |  |
| 5872-6030' w/58 - .42" Holes                                                                                                      |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  | DEPTH INTERVAL (MD)                            |  | AMOUNT AND KIND OF MATERIAL USED |  |                 |  |
|                                                                                                                                   |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  | 5872-6030'                                     |  | w/7000g. 15% NEFE acid.          |  |                 |  |
| 33.* PRODUCTION                                                                                                                   |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| DATE FIRST PRODUCTION                                                                                                             |  | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) |                                              |                                   |                                               |                                                  |                                | WELL STATUS (Producing or shut-in)                                            |  |                                                |  |                                  |  |                 |  |
| 7-15-92                                                                                                                           |  | Flowing                                                              |                                              |                                   |                                               |                                                  |                                | Producing                                                                     |  |                                                |  |                                  |  |                 |  |
| DATE OF TEST                                                                                                                      |  | HOURS TESTED                                                         |                                              | CHOKE SIZE                        |                                               | PROD'N. FOR TEST PERIOD                          |                                | OIL—BBL.                                                                      |  | GAS—MCF.                                       |  | WATER—BBL.                       |  | GAS-OIL RATIO   |  |
| 7-15-92                                                                                                                           |  | 4                                                                    |                                              | 1/4"                              |                                               | →                                                |                                | -                                                                             |  | 346                                            |  | -0-                              |  | -               |  |
| FLOW, TUBING PRESS.                                                                                                               |  | CASING PRESSURE                                                      |                                              | CALCULATED 24-HOUR RATE           |                                               | OIL—BBL.                                         |                                | GAS—MCF.                                                                      |  | WATER—BBL.                                     |  | OIL GRAVITY-API (CORR.)          |  |                 |  |
| 1400 psi                                                                                                                          |  | Pkr                                                                  |                                              | →                                 |                                               | -                                                |                                | 2077                                                                          |  | -0-                                            |  | -                                |  |                 |  |
| 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)                                                                        |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  | TEST WITNESSED BY                              |  |                                  |  |                 |  |
| Sold - reconnected to El Paso Gas Co. 7-16-92                                                                                     |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  | Tracy Richardson                               |  |                                  |  |                 |  |
| 35. LIST OF ATTACHMENTS                                                                                                           |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| None for recompletion                                                                                                             |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| 36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  |                                                |  |                                  |  |                 |  |
| SIGNED <i>Tracy Richardson</i> TITLE Production Supervisor                                                                        |  |                                                                      |                                              |                                   |                                               |                                                  |                                |                                                                               |  | DATE 7-16-92                                   |  |                                  |  |                 |  |

\*(See Instructions and Spaces for Additional Data on Reverse Side)

| 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, flowing and shut-in pressures, and recoveries): |     |        |                             | 38. GEOLOGIC MARKERS                                                                                                                     |                                                                                              |                    |                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|--------------------|---------------------|
| FORMATION                                                                                                                                                                                                                           | TOP | BOTTOM | DESCRIPTION, CONTENTS, ETC. | NAME                                                                                                                                     | MEAS. DEPTH                                                                                  | TOP<br>VERT. DEPTH | TRUE<br>VERT. DEPTH |
|                                                                                                                                                                                                                                     |     |        |                             | Tubb<br>Abo<br>Wolfcamp<br>Cisco<br>Lower Canyon<br>Strawn<br>Atoka<br>Morrow Clastic<br>Lwr. Morrow<br>Austin<br>Chester<br>Mississippi | 2826<br>3412<br>4649<br>5670<br>6645<br>7150<br>7635<br>7977<br>8118<br>8245<br>8364<br>8443 |                    |                     |