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UNITED STATES
DEPARTMENT OF THE INTERIOR
O. C. D. GEOLOGICAL SURVEY

ATTENDED TO CORRECT GAS VOLUME

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

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. ☐ Other ☐

2. NAME OF OPERATOR
Exxon Corporation

3. ADDRESS OF OPERATOR
P. O. Box 1600, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface
660' FWL & 1980' FSL of Section 31
At top prod. interval reported below
At total depth

14. PERMIT NO. DATE ISSUED
1-6-83

12. COUNTY OR PARISH Eddy 13. STATE New Mexico

15. DATE SPUDDED 7-14-83 16. DATE T.D. REACHED 7-25-83 17. DATE COMPL. (Ready to prod.) 8-11-83 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3286' - KB 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 4930' 21. PLUG, BACK T.D., MD & TVD -- 22. IF MULTIPLE COMPL., HOW MANY* -- 23. INTERVALS DRILLED BY -- ROTARY TOOLS 0-4930' CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
3602-3634' Delaware Sand

25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN
DLL-MSFL; LDT-CNL; EPT; Dipmeter

27. WAS WELL CORED No

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	48	619'	17 1/2	450 sx BJ Lite; 300 sx C1C	
8 5/8	24	2493'	11	1400 sx Lite; 300 sx C1C	
5 1/2	14	4944	7 7/8	1550 sx Trinity Lite; 250	sx C1C

LINER RECORD					TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8	3591'	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
3602-3634 w/33 shots		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
		3602-3634	1700 gals 15% HCl
			26000 gals foam, 18000# 20-40 sand
			16000# 10-20 sand

33.* PRODUCTION

DATE FIRST PRODUCTION 7-31-83 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping 2" WELL STATUS (Producing or shut-in) Producing

DATE OF TEST 8-12-83 HOURS TESTED 24 hrs. CHOKED SIZE PROD'N. FOR TEST PERIOD OIL—BBL. 140 GAS—MCF. 129 WATER—BBL. 274 GAS-OIL RATIO 922

FLOW. TUBING PRESS. 210# CASING PRESSURE CALCULATED 24-HOUR RATE OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.) 39.6

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

35. LIST OF ATTACHMENTS

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

SIGNED [Signature] TITLE Unit Head DATE November 8, 1983

ROSWELL, NEW MEXICO

*(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
Delaware Sand	2576	4816	Sandstone	Delaware Sand	2576	
				Bone Springs	4816	