

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

FORM APPROVED  
OMB NO. 1004-0137  
Expires: February 28, 1995

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

|                                                                                                                                                                                                                                 |                                    |                                                                                                                                   |                                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| 1a. TYPE OF WELL:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> Other _____                                                                                    |                                    | 5. LEASE DESIGNATION AND SERIAL NO.<br>NM84847                                                                                    |                                                    |
| b. TYPE OF COMPLETION:<br>NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. CENVR. <input type="checkbox"/> Other _____ |                                    | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                                                                              |                                                    |
| 2. NAME OF OPERATOR<br>LOUIS DREYFUS NATURAL GAS CORP.                                                                                                                                                                          |                                    | 7. UNIT AGREEMENT NAME                                                                                                            |                                                    |
| 3. ADDRESS AND TELEPHONE NO.<br>14000 Quail Springs Parkway, #600, OKC, OK 73134                                                                                                                                                |                                    | 8. FARM OR LEASE NAME, WELL NO.<br>AUODAD FEDERAL #2                                                                              |                                                    |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*<br>At surface 1980' FNL & 990' FEL<br>At top prod. interval reported below same<br>At total depth same                             |                                    | 9. API WELL NO.<br>30-015-28554                                                                                                   |                                                    |
| 14. PERMIT NO.                                                                                                                                                                                                                  |                                    | 13. STATE<br>NM                                                                                                                   |                                                    |
| DATE ISSUED<br>6/12/95                                                                                                                                                                                                          |                                    | 12. COUNTY OR PARISH<br>Eddy                                                                                                      |                                                    |
| 15. DATE SPUDDED<br>7-17-95                                                                                                                                                                                                     | 16. DATE T.D. REACHED<br>7-28-95   | 17. DATE COMPL. (Ready to prod.)<br>8-25-95                                                                                       | 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*<br>3290 GR |
| 19. ELEV. CASINGHEAD                                                                                                                                                                                                            | 20. TOTAL DEPTH, MD & TVD<br>4990' |                                                                                                                                   |                                                    |
| 21. PLUG, BACK T.D., MD & TVD<br>4947'                                                                                                                                                                                          |                                    | 22. IF MULTIPLE COMPL., HOW MANY*                                                                                                 |                                                    |
| 23. INTERVALS DRILLED BY                                                                                                                                                                                                        |                                    | 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*<br>Delaware 4880-4900'                              |                                                    |
| 25. WAS DIRECTIONAL SURVEY MADE<br>Yes                                                                                                                                                                                          |                                    | 26. TYPE ELECTRIC AND OTHER LOGS RUN<br>CBL, G/R & CCL                                                                            |                                                    |
| 27. WAS WELL CORED<br>No                                                                                                                                                                                                        |                                    | 28. CASING RECORD (Report all strings set in well)                                                                                |                                                    |
| 29. LINER RECORD                                                                                                                                                                                                                |                                    | 30. TUBING RECORD                                                                                                                 |                                                    |
| 31. PERFORATION RECORD (Interval, size and number)<br>4880-4900' 41 holes 2 SPF                                                                                                                                                 |                                    | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.                                                                                    |                                                    |
| 33. PRODUCTION                                                                                                                                                                                                                  |                                    | 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)<br>NA                                                                  |                                                    |
| 35. LIST OF ATTACHMENTS<br>Logs, Inclination Report, Drilling Report                                                                                                                                                            |                                    | 36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records |                                                    |
| SIGNED <u>Raylene Smith</u> TITLE <u>Production Analyst</u>                                                                                                                                                                     |                                    | DATE <u>9/15/95</u>                                                                                                               |                                                    |

\*(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, time tool open, flowing and shut-in pressures, and recoveries):

| FORMATION        | TOP   | BOTTOM   | DESCRIPTION, CONTENTS, ETC. | GEOLOGIC MARKERS |             |                     |
|------------------|-------|----------|-----------------------------|------------------|-------------|---------------------|
|                  |       |          |                             | NAME             | MEAS. DEPTH | TRUE<br>VERT. DEPTH |
| Delaware         | 1734' | 2413'    |                             |                  |             |                     |
| Cherry<br>Canyon | 2414' | 4990' TD |                             |                  |             |                     |