

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved  
Budget Bureau No. 42-R355.6.

5. LEASE DESIGNATION AND SERIAL NO.

NM-10774

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Mona Lisa Com.

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

White City Penn.

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

Sec. 18, T-25-S, R-27-E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

WELL COMPLETION OR RECOMPLETION RECORD

**RECEIVED**

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  
Robert N. Enfield ✓

3. ADDRESS OF OPERATOR  
P. O. Box 2431, Santa Fe, New Mexico 87501

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface 1660 FWL, 1650 FNL, Sec. 18, T-25-S, R-27-E

At top prod. interval reported below  
At total depth

14. PERMIT NO. DATE ISSUED

15. DATE SPUNDED 11/29/79 16. DATE T.D. REACHED 2/15/80 17. DATE COMPL. (Ready to prod.) R-2-20-80 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\* 3181.9 GL 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 334' 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY RECEIVED 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* None 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN None 27. WAS WELL CORED No

28. CASING RECORD (Report all strings set)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
None					

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) None

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
None	

33.\* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
None		

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO

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

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

35. LIST OF ATTACHMENTS  
None

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

SIGNED Robert N. Enfield TITLE Operator DATE 3/5/80

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