(Apni 2	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT								FORM APPROVED OMB NO. 1004-0137 Expires: March 31, 2007					
	WELL COMPLETION OR RECOMPLETION REPORT AND LOG										5	5. Lease Serial No. NMSF 479333		
	Type of Well Oil Well Gas Well Dry Other 7 Back Diff. Resvr.,									6	6. If Indian, Allottee or Tribe Name		or Tribe Name	
U JP	OtherRECEIVED										7		r CA Agree 15P35-85	ment Name and No
2. Nam	Name of Operator NM & O Operating Company 070 FARMINGTON NM									8.	Lease	Name and \	Well No.	
3. Addr									9.	9. AFI Well No. 30-039232240051				
4. Loca												10. Field and Pool, or Exploratory		
At su	At surface 1760' FSL & 940' FWL NW/SW												co - Mesav	
	1/0				NW/SW & 940' FWL						11.	11. Sec., T., R., M., on Block and Survey or Area Sec 25-T25N-R2W		
At to	tal depth 170	60' FSL	& 940' FV	VIL.							12.	County Rio Ar	y or Parish	I3. State
14. Date	m oohm	15/83	15. Date				16. Date C	• —	Ready to	Prod.	17.		ions (DF, R	KB, RT, GL)*
IR. Total	Depth: MD	<b>7560'</b>		<del></del>	Plug Back T.D.:	MD 7			20. Depth		Plug Set:	MD TVI		6750'
					ubmit copy of	each)	· • • • • • • • • • • • • • • • • • • •		Was I	vell cor OST rur tional S	?	No L No L No	Yes (Subr	nit analysis) nit report) ubmit copy)
Hole Size	ing and Liner Record (Re)  E Size/Grade Wt. (#/ft.		<del>```</del>	p (MD)	Bottom (MI	,,, -			of Sks. & She of Cement		urry Vol. Cement		t Top* Amount Pulled	
15 1/2	9 5/8"	36			384'	1-	срш	1990 0	Contain	345 6	<del></del>	Surfac	e	······································
8 \$3/4"	5 1/2"	15.5			7560'					1695	cu ft	160	0	
						-								
	<u> </u>													
Size	Tubing Record  Size Depth Set (MD) Paci			sker Depth (MD) Size			Depth Set (MD) Packer Dep		epth (MD)	(MD) Size		Depth	Set (MD)	Packer Depth (M
2 3/8"	5580'													
25. Proda	cing Intervals Formation		1 3	'on I	Dotter		Perforation		T 4	lima	No. H	olon		erf. Status
				`op	Bottom			Perforated Interval		Size No. Ho /8" 10		OICS	open open	
A) Ma	B) Mesaverde						5670'-5695'			8"	10	open		
	averde													
B) Mes C)	averde					1								
B) Mes C) D)	to the same of													~~~
B) Mes C) D) 27. Acid,	Fracture, Trea		ment Squee	ze, etc.			A	mount and	d Type of N	(ateria)				<u> </u>
B) Mes C) D) 27. Acid,	Fracture, Treat		ment Squee	ze, etc.			A	mount and	d Type of N	faterial				6 (S) (7/7
B) Mes C) D) 27. Acid,	Fracture, Treat		ment Squee	ze, etc.			A	mount and	d Type of N	faterial			A	2000.
B) Mes C) D) 27. Acid,	Fracture, Treat		ment Squee	ze, etc.			A	mount and	d Type of N	faterial			A. A	JUL 200
B) Mes C) D) 27. Acid, 5633'-5	Fracture, Treat Depth Interval	al A											<i>\$</i> ~	2000.
B) Mee C) D) 27. Acid,	Fracture, Treat Depth Interval		Test Production	ze, etc.	Gas MCF	Water	Oil Gran		Gas Gravity		roduction !	Method	<i>\$</i> ~	In 50.

\*(See instructions and spaces for additional data on page 2

Csg. Press. 24 Hr. Rate

28a. Production - Interval B

Date First Test Hours
Produced Date Tested

Choke Size 75

Gas MCF

Gas MCF

Oil BBL

Oil BBL 60

Water BBL

JUL 19 2006

FARMATON PRODUCTIONS

Oil Genvity Cost. API

Gas Gravity

Well Status

28b, Production - Interval C													
Date First	Test	Hours	Test	Oil	Gas	Water	Oil Gravity	Gas	Production Method				
Produced	Date	Tested	Production	BBL	Gas MCF	BBL	Corr. API	Gravity					
Choke Size	Thg. Press. Plwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status		1			
28c. Prod	uction - Int	erval D		<b></b>		<del></del>	<del> </del>	1		· · · · · · · · · · · · · · · · · · ·			
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method				
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status					
29. Disposition of Gas (Sold, used for fuel, vented, etc.)  Sold													
30. Summary of Porous Zones (Include Aquifers):  31. Formation (Log) Markers													
Shov tests,	v all import	tant zones	of porosity a val tested, cu	and content	31. Formation (Log) Markers								
									Top				
Form	Formation Top Bottom Descriptions, Con					puons, Conter	ns, eic.	1	Name	Meas. Depth			
32. Addi	tional remar	rks (includ	e pługging pr	ocedure):									
33. Indica	te which it	mes have t	een attached	by placing	a check in t	he appropriate	boxes:						
33. Indicate which itmes have been attached by placing a check in the appropriate boxes:    Electrical/Mechanical Logs (1 full set req'd.)													
34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*													
Name	(please prii	nt) Scott	Behm		<del></del>		Title Operat	Title Operations Analysis and Control Manager					
Signa	ture	Sa	oc !	3ekn	<u></u>	Date	7-1	3-06					

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.



## **INSTRUCTIONS**

GENERAL: This form is designed for submitting a complete and correct well completion/recompletion report and log on all types of wells on Federal and Indian leases to a Federal agency, pursuant to applicable Federal 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 office.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, and all types electric), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal laws and regulations. All attachments should be listed on this form, see item 33.

ITEM 4: Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local Federal office for specific instructions.

ITEM 17: Indicate which reported elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

ITEM 23: Show how reported top(s) of cement were determined, i.e. circulated (CIR), or calculated (CAL), or cement bond log (CBL), or temperature survey (TS).

## **PRIVACY ACT**

The Privacy Act of 1974 and the regulation in 43 CFR 2.48 (d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. et seq.; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is to be used to evaluate the actual operations performed in the drilling, completing and testing of a well on a Federal or Indian lease.

ROUTINE USES: (1) Evaluate the equipment and procedures used during the drilling and completing/recompleting of a well. (2) The review of geologic zones and formation encountered during drilling. (3) Analyze future applications to drill in light of data obtained and methods used. (4)(5) Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

EFFECT OF NOT PROVIDING INFORMATION: Filing of this report and disclosure of the information is mandatory once a well drilled on a Federal or Indian lease is completed/recompleted.

The Paperwork Reduction Act of 1995 requires us to inform you that:

This information is being collected to allow evaluation of the technical, safety, and environmental factors involved with drilling and completing/recompleting wells on Federal and Indian oil and gas leases.

This information will be used to analyze operations and to compare equipment and procedures actually used with those proposed and approved.

Response to this request is mandatory only if the operator elects to initiate drilling and completing/recompleting operations on an oil and gas lease.

BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

## **BURDEN HOURS STATEMENT**

Public reporting burden for this form is estimated to average 60 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer, (WO-630), MS 401 LS, 1849 C Street, N.W., Washington, D.C. 20240.

(Form 3160-4, page 3)

