

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED OIL CONS. DIV.
OMB NO. 1004-0137
Expires: March 31, 2007 DIST. 3

1a. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other				5. Lease Serial No. NO-G-0101-1426																																																																																					
b. Type of Completion: <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input checked="" type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resrv.				6. If Indian, Allottee or Tribe Name NAVAJO ALLOTTED																																																																																					
Other _____				7. Unit or CA Agreement Name and No.																																																																																					
2. Name of Operator COLEMAN OIL & GAS, INC.				8. Lease Name and Well No. JUNIPER COM 21 #44																																																																																					
3. Address P.O. DRAWER 3337, FARMINGTON NM 87401				9. AFI Well No. 30-045-33034																																																																																					
3a. Phone No. (include area code) 505-327-0356				10. Field and Pool, or Exploratory BASIN FRUITLAND COAL																																																																																					
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface 1100' FSL 1200' FEL NMPM, LATITUDE 36°17'40" LONGITUDE 107°53'45" At top prod. interval reported below At total depth				11. Sec., T., R., M., on Block and Survey or Area P, SEC 21, T24N R10W																																																																																					
14. Date Spudded 09/26/2006				15. Date T.D. Reached 09/28/2006																																																																																					
16. Date Completed 11/30/2006 <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod.				17. Elevations (DF, RKB, RT, GL)* 6801' GL																																																																																					
18. Total Depth: MD 1505' TVD				19. Plug Back T.D.: MD 1456' TVD																																																																																					
20. Depth Bridge Plug Set: MD TVD				21. Type Electric & Other Mechanical Logs Run (Submit copy of each) RST, CBL, VDL W/ SP, CAL, GR, CL. SENT BY SCHLUMBERGER																																																																																					
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit copy)				23. Casing and Liner Record (Report all strings set in well)																																																																																					
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*(See instructions and spaces for additional data on page 2)

ACCEPTED FOR RECORD

DEC 06 2006

FARMINGTON FIELD OFFICE

NMOCD R

28b. Production - Interval C

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	

28c. Production - Interval D

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.)

VENTED, WAITING ON PIPELINE TIE-IN.

30. Summary of Porous Zones (Include Aquifers):

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.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
NACIMIENTO	SURE.	530'			
OJO ALAMO	530'	616'			
KIRTLAND	616'	1168'			
FRUITLAND	1168'	1333'			
PICTURED CLIFFS	1333'	TD.			

32. Additional remarks (include plugging procedure):

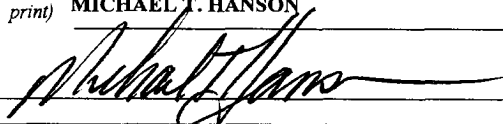
33. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☐ Electrical/Mechanical Logs (1 full set req'd.)
 ☐ Geologic Report
 ☐ DST Report
 ☒ Directional Survey
☐ Sundry Notice for plugging and cement verification
☐ Core Analysis
☐ Other:

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 print) **MICHAEL T. HANSON**Title **OPERATION ENGINEER**

Signature


Date **12/03/2006**

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.