UNITED STATES SUBMIT IN DUPLICATE* DEPARTMENT OF THE INTERIOR

Form approved. Budget Bureau No. 42-R355.5. (See other in-structions on

| \angle | | | _ | | |
|-------------|-------|-------------|-----|--------|---|
| ⁄ 5. | LEASE | DESIGNATION | AND | SERIAL | N |
| | NM - | 052031 | | 2.3 | |

| 5 . | LEASE | DESIGNATION | AND | SERIAL | NO. |
|------------|-------|-------------|-----|--------|-----|
| | NM - | 052931 | | 2.3 | |

| | (| GEOLOGICAL S | URVE | Υ | | re | verse side | 7 | DESIGN 052 | NATION AND SERIAL NO. | | |
|---|--------------------------------|---------------------------|--------------|-----------------|----------------|--|-------------------------------|--------------------|---|---|--|--|
| WELL C | OMPLETION | OR RECOMPLE | TION | REPOR | ΓΑΙ | ND I O | * | _ | | LOTTEE OR TRIBE NAME | | |
| WELL COMPLETION OR RECOMPLETION REPORT AND LOG* 1a. TYPE OF WELL: OIL GAS WELL Other Water Inj. Well | | | | | | | Navajo 7. UNIT AGREEMENT NAME | | | | | |
| b. TYPE OF C | OMPLETION: | | | Other | | 111/10 | METT | 7. UNIT A | .GREEME | INT NAME | | |
| WELL | WORK DEE | | ESVR. | Other <u>Wa</u> | ter | Inj. V | Well_ | S. FARM (| OR LEAS | SE NAME | | |
| 2. NAME OF OPE | etroleum Cor | oration | | • | | | | Hanso | | · | | |
| 3. ADDRESS OF O | | OTACION | | | | | | 9. WELL | so. | | | |
| 8700 Tes | oro Drive, Sa | an Antonio, Tex | as 78 | 8286 | | | | 43 | AND PC | OOL, OR WILDCAT | | |
| 4. LOCATION OF | WELL (Report location | n clearly and in accordan | ice with o | iny State req | yireme | nfo.* | | - | | spah, Lower Sand | | |
| | 1200 FSL & . | TOO EMP 16 | EC | EIV | | U | | | г., к., м. | ., OR BLOCK AND SURVEY | | |
| At top prod. | interval reported belo Same | 0 w | ·U | IL 3 0 198 | 35 | | | 1 - | | , <u></u> ূল | | |
| At total depti | h _ | | - 111 05 | LAND MA | NAGE | MENT | | Sec 6, T17N, R8W | | | | |
| | Same | -14/7 | CAN IN | LAND MAI | ROATE | TSSUED | | 12. COUNT | | 13. STATE | | |
| 15. DATE SPUDDED | 16. DATE T.D. RE | ACHED 17. DATE COMPL | (Rendu | to prod) | <u> </u> | | | McKir | ılev | New Mexico | | |
| 7/9/84 | 7/12/84 | 7/16/84 | | 10 prod.) | | 911' (| | RT, GR, ETC.) | 19. | ELEV. CASINGHEAD | | |
| 20. TOTAL DEPTH, M | ID & TVD 21. PLUG, | BACK T.D., MD & TVD 2 | 22. IF MU | LTIPLE COMP | L., | 23. IN | TERVALS | ROTARY TO | OOLB | 6911 GL | | |
| 1615' | 1547 | PBTD, MD&TVD | | | | DR | LLED BY | Х | | | | |
| 24. PRODUCING INT | TERVAL(S), OF THIS C | OMPLETION—TOP, BOTTOM | I, NAME (| MD AND TVD | * | | | | 2 | 25. WAS DIRECTIONAL SURVEY MADE | | |
| | spah, 1522' - | | | | | | | | | Inclination Only | | |
| | AND OTHER LOGS RU | | | | | | | | 1 | WAS WELL CORED | | |
| | uction, SFL w | | | | | | | | | No | | |
| 28. | WEIGHT, LB./FT | CASING REC | | port all string | gs set i | | | | | | | |
| 8 5/8 | 24 | 86' | | 2 1/4" | 70 | | MENTING | весовь В w/3% с | | AMOUNT PULLED | | |
| | | | - | | - | | 1000 | 3 W/ 3 ° C | | Cut to Surface | | |
| 4 1/2" | 9.5 | 1598' | - | 6 3/4" | 118 | ft ³ C | lass I | 3 w/1% c | acl | Cut top 800 | | |
| 29. | LI | NER RECORD | | | ' - | 30. | т | UBING REC | ORD | <u> </u> | | |
| 8 IZE | TOP (MD) B | SOTTOM (MD) SACKS C | EMENT* | SCREEN (M | iD) | SIZE | | EPTH SET (1 | | PACKER SET (MD) | | |
| | | - | | | | 2 3/8 | " | 1513' | | 1513' | | |
| 31. PERFORATION RE | CORD (Interval, size | and number) | | 32. | A C: | D SHOT | ED 4 Cm | | | | | |
| | | | | I | | ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. RVAL (MD) AMOUNT AND KIND OF MATERIAL USEI | | | | | | |
| Lower Hos | spah: 1524-1 | 540 | | | | | | | | | | |
| Water Ini | ection Well | | | | | | | | | | | |
| | ted to Injo | n 12/27/84 | | ļ | | | | | | | | |
| 33.* | | | PROL | UCTION | | | | | | | | |
| DATE FIRST PRODUCT | PRODUCT | ION METHOD (Flowing, go | as lift, pu | | and ty | pe of pum | P (5) | WELL | STATUS | 8 (Producing or | | |
| DATE OF TEST | HOURS TESTED | CHOKE SIZE PROD'S | . FOR | 101 3 | | GASTIC | | _ Wate | er Ir | njection Well | | |
| | | | PERIOD | | 1 | c | | WATER-BBL | " <u> </u> ' | GAS-OIL RATIO | | |
| FLOW. TUBING PRESS. | CASING PRESSURE | CALCULATED OIL—E | BBL. | GAAL | 16-2 | - 1985 | WATER-F | BL. | OIL GR | RAVITY-API (CORR.) | | |
| 34. DISPOSITION OF G | AS (Sold, used for fue | l, vented, etc.) | | -OIL- | ~~ | N. D | V | TERT WINNER | | | | |
| | | | | | 015 | 7 | | TEST WITNES | SED BY | | | |
| 35. LIST OF ATTACH | MENTS | | | | | | | ACCEPTE | D FO | R RECORD | | |
| 36. I hereby certify | that the foregoing a | nd attached information | is comple | ete and corre | ct as c | ietermine | | | | 1006 | | |
| SIGNED | Rimo toul | / | Gav | THO Per | ez, | Jr. | | MA THE | Zolda 1 | L 1985 _ | | |
| | | | | ea Produ | | | | DATE | <u>7-</u> | 22-85 | | |
| | *(See In | structions and Space | s for A | ditional D | ata o | n Rever | se Side) | | , ~') | <u></u> | | |
| | | | | | | | | 34 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 如今有1980年中1997年中央在1982年中日日本市市市市市市市市市市市市市市市市市市市市市市市市市市市市市市市市市市市 | | |

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

Hem 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 or Federal office for specific instructions, 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

for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Hem 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.

Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.) 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,

| | | FORMATION | 37. SUMMARY OF POR SHOW ALL IMPOUNDED INTERVAL |
|---|------------------|-----------------------------|---|
| | | TOP | OUS ZONES: TESTED, CUSHION |
| | | BOTTOM | ROSITY AND CONTEN |
| | | DESCRIPTION, CONTENTS, ETC. | 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, PLOWING AND SHUT-IN PRESSURES, AND RECOVERIES |
| | N A PL | V . 14 14 | 38. GEOL |
| | MEAS, DEPTH | 1, | GEOLOGIC MARKERS |
| • | TRUE VERT. DEPTH | TOP | |