

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

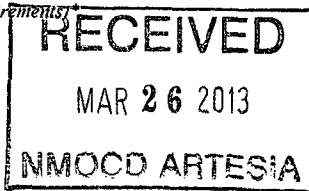
OCD Artesia

FORM APPROVED
OMB NO. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other b. Type of Completion: <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr., Other: _____										5. Lease Serial No. NM-0467933																																																			
2. Name of Operator Premier Oil & Gas, Inc.										6. If Indian, Allottee or Tribe Name																																																			
3. Address PO Box 1246 Artesia, NM 88211-1246										3a. Phone No. (include area code) 972-470-0228																																																			
4. Location of Well (Report location clearly and in accordance with Federal requirements) 330' FNL & 1650' FEL, Sec 15, T-17S, R-30E, Unit B At surface At top prod. interval reported below At total depth Same										8. Lease Name and Well No. Dale H. Parke B Tract C #17																																																			
14. Date Spudded 06/06/2003										15. Date T.D. Reached 10/11/2012																																																			
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod.										9. AFI Well No. 30-015-32396																																																			
17. Elevations (DF, RKB, RT, GL)* 37115' GL										10. Field and Pool or Exploratory Loco Hills; Glorieta-Yeso																																																			
11. Sec., T., R., M., on Block and Survey or Area Sec 15, T-17S, R-30E, Unit B										12. County or Parish Eddy County																																																			
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18. Total Depth: MD 6127' TVD										19. Plug Back T.D.: MD 6063' TVD																																																			
20. Depth Bridge Plug Set: MD RBP@4870' TVD										21. Type Electric & Other Mechanical Logs Run (Submit copy of each) N/A																																																			
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 checked="" type="checkbox"/> No <input 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)



MAR 24 2013

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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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	

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Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate BBL	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

30. Summary of Porous Zones (Include Aquifers):

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth

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

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Title Vice President

Date 02/26/2013

(Continued on page 3)