Form 9-330

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE* (See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5

5. LEASE DESIGNATION AND SERIAL NO.: NM 0525452

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: Cities 3 Federal

9. WELL NO.: 1

10. FIELD AND POOL, OR WILDCAT: Washington Upper Morrow

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: Sec. 3, T26S, R24E

12. COUNTY OR PARISH: Eddy

13. STATE: New Mexico

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

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: Black River Corporation

3. ADDRESS OF OPERATOR: 620 Commercial Bank Tower, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*
At surface: 1980' FN & WL Section 3
At top prod. interval reported below: Same
At total depth:

14. PERMIT NO.: — DATE ISSUED:

15. DATE SPUDDED: 3/11/72 | 16. DATE T.D. REACHED: 3/31/72 | 17. DATE COMPL. (Ready to prod.): 4/07/72 | 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*: 3743 RKB | 19. ELEV. CASINGHEAD: 3727

20. TOTAL DEPTH, MD & TVD: 7050 | 21. PLUG, BACK T.D., MD & TVD: 7012 | 22. IF MULTIPLE COMPL., HOW MANY*: 2 | 23. INTERVALS DRILLED BY: → | ROTARY TOOLS: Rotary | CABLE TOOLS:

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*: 6842-6854 Upper Morrow; 6913 - 6944 Morrow Lower

25. WAS DIRECTIONAL SURVEY MADE: No

26. TYPE ELECTRIC AND OTHER LOGS RUN: DIGS, ML, HDT, BHC-GR

27. WAS WELL CORED: No

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8	32	726	11	325	- -
5-1/2	14-15.5	7048	7-7/8	300	- -

LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

29. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8	6865	6865

31. PERFORATION RECORD (Interval, size and number)
Upper Morrow
6842-6854 24 holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
Natural	

RECEIVED

33. PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
4/07/72	Flowing	Shut-in

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4/12/72	4-1 this rate	18-1/2	→	0	95.33	0	- -

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
2497	Flowing 17	→	0	2238	0	- -

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.): Vented & Flared During Test

TEST WITNESSED BY: El Paso Natural Gas

35. LIST OF ATTACHMENTS:

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

SIGNED: [signature] TITLE: Agent DATE: 4/13/72

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

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 should be listed on this form, see item 35.

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 or Federal office for specific instructions.

Item 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.

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

Item 27: *"Sacks Cement"*: Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

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

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, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

38. GEOLOGIC MARKERS

NAME	TOP MEAS. DEPTH	TOP TRUE VERT. DEPTH
Lamar Transitional	484	
Bone Spring	3622	
3rd Bone Spring LS.	5368	
Perm Shale	5594	
Strawn	5785	
Morrow Clastic	6716	
Top Basal Morrow Pay Zone	6888	

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