

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a TYPE OF WELL ☒ Oil Well ☐ Gas Well ☐ Dry ☐ Other  
1b TYPE OF COMPLETION ☐ New Well ☒ Work Over ☐ Deepen ☐ Plug Back ☐ Diff Resvr

2 NAME OF OPERATOR  
AGUA SUCIA LLC

3 ADDRESS  
5708 W. Austin, St., Broken Arrow, OK 74011

3A PHONE NO  
918-704-2012

4 LOCATION OF WELL (Report location clearly and in accordance with Federal requirements)\*  
At surface 1650' FSL & 2185' FWL

At top prod. Interval reported below SAME

At total depth SAME

14 DATE SPUNDED 7-3-62 15 DATE TD REACHED 8-4-62 16 DATE COMPLETED ☐ D&A ☒ Ready to Prod

18 TOTAL DEPTH MD 682' TVD Same 19 PLUG BACK TD MD TVD

20 DEPTH BRIDGE PLUG SET: MD TVD

21 TYPE ELECTRIC & OTHER MECH LOGS RUN (Submit copy of each)

22. Was well cored? ☒ No ☐ Yes (Submit analysis)  
Was DST run? ☒ No ☐ Yes (Submit report)  
Directional Survey? ☒ No ☐ Yes (Submit copy)

23 CASING and LINER RECORD (Report all strings set in well)

Hole Size	Size/Grade	Wt (#/ft.)	Top (MD)	Bottom (MD)	Stage Cmr Depth	No. of Sks. & Type of Cmt	Slurry Vol. (Bbl)	Cement Top*	Amount Pulled
8 7/8"	7 1/2"			460'		Mudded			460'
6 1/4"	5 1/2"			658'		100 sxs		Surface	

24 Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2 3/8 J-55	628'							

25 Producing Intervals

Formation	Top	Bottom	Perforation Record	Size	No of Holes	Perf Status
A) Yates	666	677	OPEN HOLE			
B)						
C)						

27 Acid, Fracture, Treatment, Cement Squeeze, etc

Depth Interval 666-677 Amount and Type of Material 15,000 lbs. 20/40 sand and 265 bbls. oil

RECEIVED

JAN 18 2012

NMOC D ARTESIA

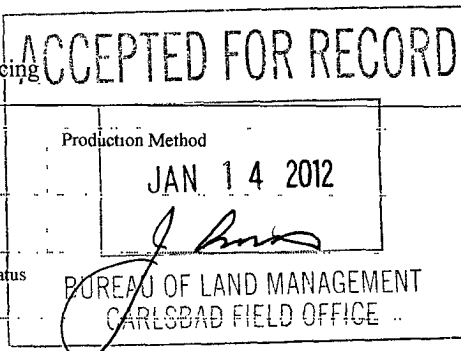
28 Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr API	Gas Gravity	Production Method
1/5/12	1/7/12	24	→	1	0	15	33		Pump
Choke Size	Tbg Press Flwg	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
	15#	15#	→	1	0	15		Producing	

28a Production - Interval B

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	

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)

30 Summary of Porous Zones (Include Aquifers)

Show all important zones of porosity and contents thereof Cored intervals and all drill-stem test, including depth interval tested, cushion used, time tool open, flow and shut-in pressures and recoveries

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc
	0	85	Surface sand, clay etc.
	85	200	Red beds and sand
	200	424	Gyp, red beds salty at 391-420
	424	436	Hard Anhydrite
	436	484	Lime and anhydrite
	484	494	Lime and shale breaks
	494	552	Lime and anhydrite, few shale breaks
	552	583	Brown lime, some anhydrite
	583	603	Sand and anhydrite

Name	Top
Fletcher	424
Tansill	436
Ocotillo	484
Yates	583

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) Debbie McKelvey 575-392-3575 Title AGENT

Signature Debbie McKelvey Date 1/10/12

(August 2007)

UNITED STATES **OCD-ARTESIA**  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0137  
Expires: July 31, 2010

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an  
abandoned well. Use Form 3160-3 (APD) for such proposals.*

**SUBMIT IN TRIPLICATE** – Other instructions on page 2.

1. Type of Well <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> INJECTION		5. Lease Serial No. NMNM 08277
2. Name of Operator Agua Sucia LLC		6. If Indian, Allottee or Tribe Name _____
3a. Address 5708 W. Austin St., Broken Arrow, OK 74011	3b. Phone No. (include area code) 918-704-2012	7. If Unit or CA, Agreement, Name and/or No. _____
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) UL K, 1650' FSL & 2185' FWL Sect. 33, T20S, R28E		8. Well Name and No. Saladar Federal #6
		9. API Well No. 30-015-02448
		10. Field and Pool, or Exploratory Area SALADAR; YATES
		11. County or Parish, State Eddy, NM

**12. CHECK APPROPRIATE BOX(es) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input checked="" type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Convert to Producer
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

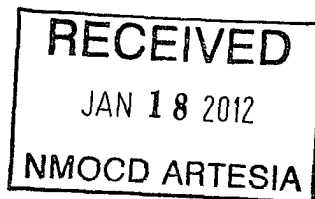
13. Describe Proposed or Completed Operation. Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be Filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

**Convert Injector to Producer and Start Producing**

Ran 19 jts. 2 3/8", J-55 tbg. and set at 628'. Ran 22 3/4" rods, and pump and begin production on 1/5/12.

24-hr. well test 1/7/12: 1 BO and 15 BW

*Provide C-102*  
Accepted for record  
NMOCD



14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)

Debbie McKelvey 575-392-3575

Title AGENT

Signature

*Debbie McKelvey*

Date 1/10/12

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

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 and false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.