

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Artesian NM 882

(See other instructions on reverse side)

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

McKay Oil Corporation

3. ADDRESS OF OPERATOR

Post Office Box 2014, Roswell, NM

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

1700' FWL & 660' FNL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

RECEIVED

AUG - 6 1993

C. I. D.

5. LEASE DESIGNATION AND SERIAL NO.

NM-78341

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Rugged Federal

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

W. Pecos Slope Abo

11. SEC., T., R., N., OR BLOCK AND SURVEY OR AREA

Sec. 23-5S-21E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

15. DATE SPUDDED

4-30-91

16. DATE T.D. REACHED

6-11-91

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

4260'

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR CNL Density; DLL/Micro SFL

27. WAS WELL CORED

No

28. 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" | 24# | 1190 | 12 1/4" | 180 sxs Halliburton lite | + 345' x C |
| | | | | 150 sxs Halliburton Premium | via 1" pipe |
| 4 1/2" | 10.5# | 3640 | | 540 sxs | |

29. LINER RECORD

| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) |
|------|----------|-------------|---------------|-------------|------|----------------|-----------------|
| | | | | | | | |
| | | | | | | | |

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

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

| DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED |
|---------------------|----------------------------------|
| | Part ID-2 |
| | 8-20-93 |
| | comp & B |

33.* PRODUCTION

| | | | | | | | |
|-----------------------|-----------------|--|-------------------------|----------|----------|------------------------------------|-------------------------|
| DATE FIRST PRODUCTION | | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) | | | | WELL STATUS (Producing or shut-in) | |
| | | | | | | SI <i>W/o plugging</i> | |
| DATE OF TEST | HOURS TESTED | CHOKE SIZE | PROD'N. FOR TEST PERIOD | OIL—BBL. | GAS—MCF. | WATER—BBL. | GAS-OIL RATIO |
| | | | → | | | | |
| FLOW. TUBING PRESS. | CASING PRESSURE | CALCULATED 24-HOUR RATE | OIL—BBL. | GAS—MCF. | | WATER—BBL. | OIL GRAVITY-API (CORR.) |
| | | → | | | | | |

ACCEPTED FOR RECORD
PETER W. CHESTER

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Copy of logs; Deviation Report

36. I hereby certify that the foregoing and attached information is complete and correct to the best of my knowledge and belief, and that it is true and accurate in all material respects.

SIGNED

Theresa Rodriguez

TITLE

Production Analyst

DATE

8-3-93

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