

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0137  
Expires: March 31, 2007

## 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										5. Lease Serial No. NMNM0245247
1b. Type of Completion: <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input checked="" type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resrv., Other _____										6. If Indian, Allottee or Tribe Name
2. Name of Operator C. W. TRAINER										7. Unit or CA Agreement Name and No.
3. Address 1008 W. Broadway, Hobbs, NM 88240					3a. Phone No. (include area code) 505-393-2727			8. Lease Name and Well No. McElvain #5		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface 660' FSL & 810' FWL At top prod. interval reported below At total depth										9. AFI Well No. 30-025-29051 0052
14. Date Spudded 02/20/2004										10. Field and Pool, or Exploratory EK Delaware
15. Date T.D. Reached 03/08/2004										11. Sec., T., R., M., on Block and Survey or Area 25-18S-33E
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod.										12. County or Parish Lea
17. Elevations (DF, RKB, RT, GL)* 3830.6 GR										13. State NM
18. Total Depth: MD 10,000 TVD					19. Plug Back T.D.: MD 9,960 TVD 9000			20. Depth Bridge Plug Set: MD TVD		
21. Type Electric & Other Mechanical Logs Run (Submit copy of each)										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)										
Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled	
				SEE	ORIGINAL	DATA				
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 7/8"	5528'			
25. Producing Intervals										
Formation		Top	Bottom	26. Perforation Record						
				Perforated Interval		Size	No. Holes	Perf. Status		
A)		5668'	5742'	5668'-5742'						
B)										
C)										
D) CIBP @ 9000' w/2 sx cmt										
27. Acid, Fracture, Treatment, Cement Squeeze, etc.										
Depth Interval			Amount and Type of Material							
5668'-5742'			Acidz w/2500 gals 15% acid Frac in 8 stages w/1491 bbls gel wtr & 147,300 16/30 sd							
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	
03/17/2004		24	→	110	21	47			PUMP	
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status		
			→	110	21	47				
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		
			→							

\*(See instructions and spaces for additional data on page 2)

ACCEPTED FOR RECORD  
DAVID R. GLASS  
PETROLEUM ENGINEER  
FEB 17 2005

## 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 tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
			SEE ORIGINAL DATA		

32. Additional remarks (include plugging procedure):

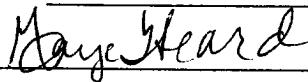
## 33. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☐ 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) GAYE HEARDTitle AGENT

Signature

Date 02/14/2005

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