| 10.15 From S. America, No. 88(1) 10.10 Conservation Division 12.20 South St. Francis Dr. Santa Fc, NM 87505 3. Santa Fc, NM 87505 3. Santa Fc, NM 87505 3. Santa Fc, NM 87505 4. Receast for filling.  WELL COMPLETION OF REPORT (Fill in boos #1 for state and Free wells only)  | Submit To Appropriate District Office Two Copies <u>District 1</u> 1625 N French Dr., Hobbs, NM 88240      |                             |          |            | BBS (    | State of New Mexico  Soft Dergy, Minerals and Natural Resources |          |                 |           |               |              |              | Form C-105 Revised August 1, 2011  1. WELL API NO. |                                   |             |          |  |            |             |  |
|---|--|-----------------------------|----------|------------|----------|---|----------|-----------------|-----------|---------------|--------------|--------------|--|-----------------------------------|-------------|----------|--|------------|-------------|--|
| WELL COMPLETION OREGINAL  | 811 S First St, Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd, Aztec, NM 87410 DEC  District IV |                             |          |            | 1        | 3 2011 Oil Conservation Division 1220 South St. Francis Dr.     |          |                 |           |               |              | -            | STATE FEE FED/INDIAN                               |                                   |             |          |  |            |             |  |
| 4 Reason for filling.  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee wells only)  COMPLETION REPORT (Fall in boxes #1 through #31 for State and Fee well only in through #31 for State And Fee well only in through #31 for State And Fee well only in through #31 for State And Fee well only in through #31 for State And Fee well only in through #31 for State And Fee well only in through #32 for State And Fee well only in through #32 for State And Fee well only in through #32 for State And Fee well only in through #32 for Stat  | WELL   | COMP                        | LETI     | ION C      | )REG     | 国域  | MPLI     | ETION RE        | POI       | RTA           | ND           | LOG          | i  |                                   | Hilli       |          |  |            |             |  |
| C.144 CLOSURE ATTACHMENT (19th in brows 81 through #31 for State and Fee wells only)  | 4 Reason for fil   | 4 Reason for filing.        |          |            |          |   |          |                 |           |               |              |              | ad policies and of the safe                        |                                   |             |          | South the state of |            |             |  |
| #33 getach this and the piles to the C-144 closure report in accordance with 1915 IT 13 K NMAC)  Type of Compiler  New Will.    10 Address of Operator   10 Address of Oper  | · •  |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| New Well.   | #33; attach this and the plat to the C-144 closure report in accordance with 19 15.17 13 K NMAC)           |                             |          |            |          |   |          |                 | 001       |               |              |              |  |                                   |             |          |  |            |             |  |
| 1000  | NEW WELL   WORKOVER   DEEPENING   PLUGBACK   DIFFERENT RESERVOIR   |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| 1000 Losissana, Six 4300, House, TX 77002   1000 Link Link   Section   Township   Range   Lot   Feet from the   NS Line   Feet from the   SW Line   County  | 10 Address of O  | perator                     |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          | <  | (97        | 834>        |  |
| 12.1   10   10   10   10   10   10   10   | 1000 Louisiana.  | Ste 4300.                   | Housto   | on. TX 7   | 7002     |   |          |                 |           |               |              |              | ļ  |                                   |             |          |  |            |             |  |
| BH:   |  |                             |          |            |          | Towns   | hip      | Range Lot       |           | Feet from     |              | Feet from th | he   | N/S Line Feet from the            |             |          |  |            |             |  |
| 15. Date Spudded 14. Date TD Reached 37:21/1    15. Date Spudded 14. Date TD Reached 37:21/1    16. Date Completed (Ready to Produce)    17. Elevations (DF and RKB, 37:21/1    18. Total Messaured Depth of Well 91. Ptg. Back Measured Depth 9208*    18. Total Messaured Depth of Well 91. Ptg. Back Measured Depth 9208*    19. Was Directional Survey Made?    19. Date State of Depth (Septend Depth 9208*    19. Date Laterlog, Spectral Density, Date Laterlog, Date Laterlog, Spectral Density, Date Laterlog, Date Laterlog, Date Laterlog, Date Laterlog, Date Laterlog, Spectral Density, Date Laterlog, Dat  | Surface:   | 0                           | 3        | 36         |          |   |          | 36E             |           |               | 662          |              |  |                                   | 2513        |          |  |            | Lea         |  |
|   |  |                             | 3        | 6          |          |   |          |                 |           |               |              |              |  | _                                 |             |          |  |            |             |  |
| 208'   208'   Doublaterlog, Spectral Density, Dark Laterlog, Dar    | 3/21/11  | 4/25/                       | 11       |            | ned      | 4/26  | 11       |                 |           | 12/2/11       |              |              |  | RT, GR, etc                       |             |          | etc.) 357  | 'I GR      |             |  |
| Devonian at 8337' to Fusselman top @ 8828'. TD of open hole @ 8208'   Imager, GR/CBL/CCL  | 9208'  |                             |          |            |          | 9208  | , -      |                 | oth       |               |              |              |  | ·                                 | i           | Dual Lat | erlog, S   | Spectral [ | Density,    |  |
| CASING SIZE WEIGHT LB FT. DEPTH SET HOLE SIZE CEMENTING RECORD AMOUNT PULLED  20 94 40 26 Redimix to surface  13 3/8 48 1036 17 ½ 1000sxs to surface  9 5/8 40 5042 12 ½ 700 sxs to surface  7 26 8361 8 ¾ 1157 sxs to surface  1 (two stage)  24. LINER RECORD 25 TUBING RECORD  SIZE TOP BOTTOM SACKS CEMENT SCREEN SIZE DEPTH SET PACKER SET  3 ½°° 9.3 # 8300 8300  26 Perforation record (interval, size, and number)  Open hole - \$361 to 9208  PRODUCTION  Date First Production Active Choke Size Production Flowing, gas lift, pumping - Size and type pump)  AGI Well  Date of Test Hours Tested Choke Size Production Gas - MCF Water - Bbl Gas - Oil Ratio  Flow Tubing Casing Pressure Calculated 24 Hour Rate Hour Rate  Production of Gas (Sold, used for fuel, venied, etc.)  NA  31 List Attachmenis Logs  NA  33.1 If an on-site burial was used at the well, attach a plat with the location of the temporary pit NA  33.1 If an on-site burial was used at the well, report the exact location of the on-site burial Na  Name W. A. Baker T. Title Dr./g. Engr.  Date First Production Shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name W. A. Baker T. Title Dr./g. Engr.  Date 124/11 Date Gas W. A. Date 124/14 Just A. Date 124/14 |  |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| 20 94 40 26 Redimix to surface 13 3/8 48 1036 17 ½ 1000sxs to surface 9 5/8 40 5042 12 ½ 700 sxs to surface 7 26 8361 8½ 1157 sxs to surface (Iwo stage) 24 LINER RECORD 25 TUBING RECORD SIZE TOP BOTTOM SACKS CEMENT SCREEN SIZE DEPTH SET PACKER SET 3 ½° 9.3 # 8300 8300  26 Perforation record (interval, size, and number) Open hole - 8361 to 9208  PRODUCTION  Production Method (Flowing, gas lift, pumping - Size and type pump) Acti Well  Date of Test Hours Tested Choke Size Prod'n For Test Period Test Period Casing Pressure Hour Rate Hour Rate Production of Gas (Sold, used for fue), vented, etc.)  NA 3 List Attachmenis Logs 10 List Attachmenis Logs 11 List Attachmenis Logs 11 List Attachmenis Logs 12 List Emporary pit was used at the well, attach a plat with the location of the on-site burial NA Latitude Longitude Nate Priod Name W. B. Sakar I Title Dr. Jg. Engt. Date Party. Date Party. Date Party from the best of my knowledge and belief Printed W. B. Sakar I Title Dr. Jg. Engt. Date Party. Date Party from the complete to the best of my knowledge and belief Printed W. B. Sakar I Title Dr. Jg. Engt.  Latitude Longitude M. Date Party. Date Party Complete Comple  | 23.  |                             |          |            |          |   | CAS      | ING REC         | OR        | D (R          | epo          | ort all str  | ing  |                                   |             |          |  |            |             |  |
| 13 3/8 48 1036 17 1/4 1000sxs to surface 9 5/8 40 5042 12 1/4 700 sxt o surface 7 26 8361 83/4 1157 sxs to surface 1  |  | ZE                          | W        |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| 9 5/8 40 5042 12 1/4 700 sxs to surface  7 26 8361 8 3/4 1157 sxs to surface  1 10 17 sxs to surface  24 LINER RECORD 25 TUBING RECORD  SIZE DEPTH SET PACKER SET  3 1/2 9,3 # 8300 8300  26 Perforation record (interval, size, and number)  Open hole - 8361 to 9208  PRODUCTION  Date First Production AGI Well AGI Well  AGI Well  AGI Well  Casing Pressure Calculated 24-Hour Rate Hour Rate Hour Rate  Press  3 1/2 9 AGIS AUGUST AGIS AGIS AUGUST AGIS AGIS AUGUST AGIS AGIS AUGUST AGIS AGIS   |  |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| Top   BOTTOM   SACKS CEMENT   SCREEN   SIZE   DEPTH SET   PACKER SET  |  |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| 24. LINER RECORD 25 TUBING RECORD  SIZE TOP BOTTOM SACKS CEMENT SCREEN SIZE DEPTH SET PACKER SET  3 ½" 9.3 # 8300 8300  26 Perforation record (interval, size, and number)  Copen hole - 8361 to 9208  PRODUCTION  Date First Production Production Method (Flowing, gas lift, pumping - Size and type pump) AGI Well  Date of Test Hours Tested Choke Size Prod'n For Test Period Test Period Test Period Tubing Casing Pressure Calculated 24-Hour Rate Hour Rate  Press  29 Disposition of Gas (Sold, used for fuel, venied, etc.)  NA  31 List Attachments  12 Longitude Name W.A. Baker I Title Dr./g. Engr.  Date Printed Name W.A. Baker I Title Dr./g. Engr.  Date Printed Name W.A. Baker I Title Dr./g. Engr.  Date Printed Name W.A. Baker I Title Dr./g. Engr.  Date Printed Name W.A. Baker I Title Dr./g. Engr.  Date Casing Press. Date Witnessed By Name And Complete to the best of my knowledge and belief Printed Name W.A. Baker I Title Dr./g. Engr.  Date Printed Name W.A. Baker I Title Dr./g. Engr.  Date Printed Name W.A. Baker I Title Dr./g. Engr.  Date Printed Name W.A. Baker I Title Dr./g. Engr.  Date Printed Name W.A. Baker I Title Dr./g. Engr.  Date Printed Name W.A. Baker I Title Dr./g. Engr.  Date Pressure Venical Production of the St.   |  |                             |          |            |          |   |          |                 |           | -             |              |              |  |                                   |             |          |  |            |             |  |
| SIZE TOP BOTTOM SACKS CEMENT SCREEN SIZE DEPTH SET PACKER SET 3 ½" 9.3 # 8300 8300  26 Perforation record (interval, size, and number)  Open hole - 8361 to 9208  27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED  None  Production Method (Flowing, gas lift, pumping - Size and type pump)  AGI Well  Date of Test Hours Tested Choke Size Prod'n For Test Period Test Period  Test Period Oil - Bbl Gas - MCF Water - Bbl. Oil Gravity - API - (Corr)  Press  29 Disposition of Gas (Sold, used for fuel, vented, etc)  NA  31 List Attachments  Logs  32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit NA  33. If an on-site burial was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, attach a plat with the location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact location of the on-site burial'  NA  1 I set the porary pit was used at the well, report the exact loca  |  |                             |          |            | <u> </u> |   |          |                 |           |               |              |              |  |                                   | <del></del> |          |  |            |             |  |
| 26 Perforation record (interval, size, and number) Open hole - 8361 to 9208  27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL None  28  PRODUCTION  Date First Production 12/2/11  Date of Test Hours Tested Choke Size Prod'n For Test Period Oil - Bbl Gas - MCF Water - Bbl Oil Gravity - API - (Corr)  Press  29 Disposition of Gas (Sold, used for fuel, vented, etc) NA 31. List Attachments Logs  30. Test Witnessed By  30. Test Witnessed By  31. List Attachments Logs  All Is a temporary pit was used at the well, attach a plat with the location of the temporary pit NA 33. If an on-site burial was used at the well, report the exact location of the on-site burial  NA A I have by certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name W. A. Baker I. Title Drly - Engr. Date 12/2/1/  13/4/1/  13/4/1/  Date 13/4/1/  14/4/1/  15/4/  15/4/1/  15/4/  15/4/1/  15/4/1/  15/4/1/  15/4/1/  15/4/1/  15/4/1/  15/4/1/  15/4/1/  15/4/1/  15/4/1/  15/4/1/  15/4/   |  |                             |          |            |          |   | LINE     |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| 26 Perforation record (interval, size, and number)  Open hole - 8361 to 9208  PRODUCTION  Date First Production Method (Flowing, gas lift, pumping - Size and type pump)  Date of Test  Hours Tested  Choke Size  Prod'n For Test Period  Claculated 24-Hour Rate Hour Rate  Pross  Prosposition of Gas (Sold, used for fuel, vented, etc)  NA  33. If an on-site burial was used at the well, etport the exact location of the temporary pit NA  Latitude  Longitude  NAD 1927 1983  I fine on-site burial was used at the well, report the exact location of the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name  W. A. Baker I Title Drlg. Engr.  Date  12/2/1/1  Production Method (Flowing, gas lift, pumping - Size and type pump)  Well Status (Frod or Shut-in)  Well Status (Frod or Shut-in)  Gas - MCF  Water - Bbl.  Gas - MCF  Water - Bbl.  Oil Gravity - API - (Corr)  30. Test Witnessed By  NA  31. List Attachments  Logs  NA  Latitude  Longitude  NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed  Name  W. A. Baker I Title Drlg. Engr.  Date  12/2/4/1   | SIZE   | TOP                         |          |            | BOT      | STOM SACKS CEMENT   |          |                 |           |               |              |              |  |                                   |             |          |  |            | ER SET      |  |
| Open hole – 8361 to 9208    DEPTH INTERVAL   AMOUNT AND KIND MATERIAL USED  |  | +-                          |          |            |          |   |          |                 |           | <u> </u>      |              |              | 5 /  | 2 γ.5 π                           | 1850        | , o      |  | 0300       |             |  |
| None  | 26 Perforation   | record (i                   | nterval, | , size, ar | nd num   | iber)   |          |                 |           | 27. 4         | ACI          | D, SHOT,     | FR/  | ACTURE, CE                        | MEN'        | r, squi  | EEZE,  | ETC.       |             |  |
| PRODUCTION  Date First Production   Production Method (Flowing, gas lift, pumping - Size and type pump)   Well Status (Prod or Shut-in)    Date of Test   Hours Tested   Choke Size   Prod'n For Test Period   Oil - Bbl   Gas - MCF   Water - Bbl   Gas - Oil Ratio    Flow Tubing   Casing Pressure   Calculated 24- Hour Rate   Oil - Bbl   Gas - MCF   Water - Bbl   Oil Gravity - API - (Corr )  Press   Oil Gravity - API - (Corr )    NA   31 List Attachments    Logs   32. If a temporary pit was used at the well, attach a plat with the location of the emporary pit    NA   Latitude   Longitude   NAD 1927 1983    I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief    Printed   Name   W. A.   Baker   I Title   Drlg - Engr.   Date    12/4/11   Date   Date    12/4/11   Da  | DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED   |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| Date First Production 12/2/11  Date of Test  Hours Tested  Choke Size  Prod'in For Test Period  Cloudated 24-Hour Rate  Pross  Casing Pressure  Calculated 24-Hour Rate  Prod'in For Test Period  Oil - Bbl  Gas - MCF  Water - Bbl  Oil Gravity - API - (Corr)  30. Test Witnessed By  NA  31 List Attachments  Logs  32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit NA  33. If an on-site burial was used at the well, report the exact location of the on-site burial  NA  Latitude  Longitude  NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed Name  NA  Baker I  Title Dr/g-Engr.  Date  12/4/4  Date  | None None  |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| Date First Production 12/2/11  Date of Test  Hours Tested  Choke Size  Prod'in For Test Period  Cloudated 24-Hour Rate  Pross  Casing Pressure  Calculated 24-Hour Rate  Pross  Casing Pressure  Calculated 24-Hour Rate  Pross  29 Disposition of Gas (Sold, used for fuel, vented, etc.)  NA  31 List Attachments  Logs  32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit NA  33. If an on-site burial was used at the well, report the exact location of the on-site burial  NA  Latitude  Longitude  NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed Name  NA  Baker I  Title Dr/g-Engr.  Date  12/29/11  Date  |  |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| Date First Production 12/2/11  Date of Test  Hours Tested  Choke Size  Prod'in For Test Period  Cloudated 24-Hour Rate  Pross  Casing Pressure  Calculated 24-Hour Rate  Pross  Casing Pressure  Calculated 24-Hour Rate  Pross  29 Disposition of Gas (Sold, used for fuel, vented, etc.)  NA  31 List Attachments  Logs  32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit NA  33. If an on-site burial was used at the well, report the exact location of the on-site burial  NA  Latitude  Longitude  NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed Name  NA  Baker I  Title Dr/g-Engr.  Date  12/29/11  Date  | 28   |                             |          |            |          |   |          |                 | PR        | ODU           | $\mathbf{C}$ | TION         |  |                                   |             |          |  | <u> </u>   |             |  |
| 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)  29 Disposition of Gas (Sold, used for fuel, vented, etc)  NA 31 List Attachments Logs  32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit NA 33. If an on-site burial was used at the well, report the exact location of the on-site burial NA 1 hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief Printed Name W. A. Baker I Title Drly-Engr. Date 12/4/11  E-mail Address Wbaker & Cambrianm Int. cem  | Date First Produc  | ction                       |          |            |          |   | nod (Flo |                 |           |               |              |              |  | Well Status                       | (Prod       | or Shut- | ın)  |            |             |  |
| Flow Tubing Pressure Calculated 24- Hour Rate  29 Disposition of Gas (Sold, used for fuel, vented, etc)  NA  31 List Attachments Logs  32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit NA  33. If an on-site burial was used at the well, report the exact location of the on-site burial  NA  Latitude  Longitude  NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed Name  W.A. Baker I Title Drly-Engr.  Date  12/4/4  E-mail Address Wbaker & cambrianmymt. cem   | 12/2/11  |                             |          | A          | GI We    | li  |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| Press Hour Rate  29 Disposition of Gas (Sold, used for fuel, vented, etc)  NA  31 List Attachments Logs  32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit NA  33. If an on-site burial was used at the well, report the exact location of the on-site burial  NA  Latitude  Longitude  NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed Name  NA  Baker I  Title Dr/g-Engr.  Date  12/9/11  E-mail Address Wbaker & cambriann 1mt. cem   | Date of Test   | Date of Test Hours Tested C |          |            | Chol     |   |          |                 |           | Oil - Bbl Gas |              |              | Gas  | - MCF Water - Bbl Gas - Oil Ratio |             |          | l Ratio  |            |             |  |
| NA 31 List Attachments Logs  32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit NA 33. If an on-site burial was used at the well, report the exact location of the on-site burial  NA  Latitude Longitude NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed Name W. A. Baker I  Title Dr/g. Engr.  Date 12/9/1  E-mail Address Wbaker & cambrianm gmt. cem  |  |                             |          |            |          |   |          | ·               | Gas - MCF |               |              |              | Water - Bbl. Oil Gravity - API - (Corr)            |                                   |             |          |  |            |             |  |
| 31 List Attachments Logs  32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit NA  33. If an on-site burial was used at the well, report the exact location of the on-site burial  NA  Latitude  Longitude  NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed  Name  NA  Baker I  Title Dr/g-Engr.  Date  12/9/1  E-mail Address Wbaker & cambriann gmt. com  | 29 Disposition of Gas (Sold, used for fuel, vented, etc.)  30. Test Witnessed By                           |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| 32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit  NA  33. If an on-site burial was used at the well, report the exact location of the on-site burial  NA  Latitude  Longitude  NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed  Name  NABaker I  Title Dr/g-Engr.  Date  12/9/11  E-mail Address Wbaker & cambriannymt. com   | 31 List Attachments  |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |
| NA  33. If an on-site burial was used at the well, report the exact location of the on-site burial  NA  Latitude Longitude NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed Name W. A. Baker I Title Dr/g-Engr.  Date  12/9/1  E-mail Address Wbaker & cambriann gmt. com   | _  | v nit wae ·                 | ised at  | the well   | attac    | h a nlaf  | with the | location of the | tome      | Organi m      | it           |              |  |                                   |             |          |  |            |             |  |
| Latitude Longitude NAD 1927 1983  I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed Name W. A. Baker I Title Dr/g-Engr.  E-mail Address Wbaker & cambriann gmt. com  Date   | l NA   |                             |          |            |          | _   |          |                 | •         | ٠.            |              |              |  |                                   |             |          |  |            |             |  |
| I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief  Printed Name W. A. Baker I Title Dr/g-Engr.  E-mail Address wbaker & cambriann gmt. com  Date  12/9/11  | NA   |                             |          |            |          |   |          | Latitude        |           |               |              |              |  | Longitude                         |             |          |  | RI A       | D 1027 1002 |  |
| Signature WHBala I Printed Name W. A. Baker I Title Dr/g-Engr. Date 12/9/11  E-mail Address wbaker & cambrian mgmt. com   | I hereby certif  | fy that th                  | he info  | ormati     | on sh    | own o   | n both   | sides of this   | forn      | n is tri      | ue a         | and comple   | ete i  | to the best of                    | f my k      | nowlea   | ge an  | d belief   | 1921 1983   |  |
| E-mail Address Whaker @ cambrian mgmt. com  |  |                             |          |            |          |   | P<br>N   | rinted W. A     | P. 13.    | aker          | - 2          | Z Title      | e <i>[</i>   | Drlg. En                          | gr.         |          |  | Date       | , ,         |  |
| R-13052 ECG 4-9-2012 APR 1 0 2012   | E-mail Addres  | ss wb                       | akes     | -0 -       | ant      | rian  | m j m    | t.com           |           |               |              |              |  |                                   |             | 1/1      | _  |            | -17/11      |  |
|   | R-13052 ECG 4-9-2012 APR 10 2012   |                             |          |            |          |   |          |                 |           |               |              |              |  |                                   |             |          |  |            |             |  |

## **INSTRUCTIONS**

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

## INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

|                 | Southeaster | n New Mexico      | Northwestern New Mexico |                  |  |  |  |
|-----------------|-------------|-------------------|-------------------------|------------------|--|--|--|
| T. Anhy         | 980_        | T. Canyon         | T. Ojo Alamo            | T. Penn A"       |  |  |  |
| T. Salt         | 1070_       | T. Strawn         | T. Kirtland             | T. Penn. "B"     |  |  |  |
| B. Salt_        |             | T. Atoka          | T. Fruitland            | T. Penn. "C"     |  |  |  |
| T. Yates        |             | T. Miss           | T. Pictured Cliffs      | T. Penn. "D"     |  |  |  |
| T. 7 Rivers     |             | T. Devonian 8337  | T. Cliff House          | T. Leadville     |  |  |  |
| T. Queen_       | 3084        | T. Silurian_      | T. Menefee              | T. Madison       |  |  |  |
| T. Grayburg     | 3414        | T. Montoya        | T. Point Lookout        | T. Elbert        |  |  |  |
| T. San Andres   |             | T. Simpson        | T. Mancos               | T. McCracken     |  |  |  |
| T. Glorieta     | 5033        | T. McKee          | T. Gallup               | T. Ignacio Otzte |  |  |  |
| T. Paddock      |             | T. Ellenburger    | Base Greenhorn          | T.Granite        |  |  |  |
| T. Blinebry     |             | T. Gr. Wash       | T. Dakota               |                  |  |  |  |
| T.Tubb          | 6230        | T. Delaware Sand  | T. Morrison             |                  |  |  |  |
| T. Drinkard     |             | T. Bone Springs   | T.Todilto               |                  |  |  |  |
| T. Abo          | 6885        | T. Fusselman 8828 | T. Entrada              |                  |  |  |  |
| T. Wolfcamp     | 8721        | T.                | T. Wingate              |                  |  |  |  |
| T. Penn_        |             | Т                 | T. Chinle               |                  |  |  |  |
| T. Cisco (Bough | C)          | T.                | T. Permian              | _                |  |  |  |

**OIL OR GAS** 

|                               |                               |                                 | SANDS OR ZONES |
|-------------------------------|-------------------------------|---------------------------------|----------------|
| No. 1, from                   | to                            | No. 3, from                     | to             |
| No. 2, from                   | to                            | No. 4, from                     | to             |
|                               | IMPOR <sup>1</sup>            | TANT WATER SANDS                |                |
| Include data on rate of water | r inflow and elevation to whi | ich water rose in hole.         |                |
| No. 1, from                   | to                            | feet                            |                |
| No. 2, from                   | to                            | feet                            |                |
|                               |                               | feet                            |                |
|                               |                               | ORD (Attach additional sheet it |                |

| From | То | Thickness<br>In Feet | Lithology | From | То | Thickness<br>In Feet | Lithology |
|------|----|----------------------|-----------|------|----|----------------------|-----------|
|      |    |                      |           |      |    |                      |           |
|      |    |                      |           |      |    |                      |           |
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|      |    |                      |           | i    |    |                      |           |
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|      |    |                      |           |      |    |                      |           |