

Submit To- Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88201 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>				<b>Form C-105</b> Revised August 1, 2011											
		NOV 15 2012 HOBBBS OCD				1. WELL API NO. 30-025-34504											
						2. Type of Lease <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN											
						3. State Oil & Gas Lease No.											
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>																	
4. Reason for filing:  <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)						5. Lease Name or Unit Agreement Name L.G. WARLICK "A"											
						6. Well Number:  3											
7. Type of Completion: <input type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input checked="" type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER																	
8. Name of Operator CHEVRON MIDCONTINENT, L.P.						9. OGRID 241333											
10. Address of Operator 15 SMITH ROAD MIDLAND, TEXAS 79705						11. Pool name or Wildcat PENROSE SKELLY; GRAYBURG											
12. Location		Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County						
Surface:		I	19	21-S	37-E		1880	SOUTH	760	EAST	LEA						
BH:																	
13. Date Spudded		14. Date T.D. Reached		15. Date Rig Released		16. Date Completed (Ready to Produce)			17. Elevations (DF and RKB, RT, GR, etc.)								
06/15/2005				06/20/2005		06/15/2005											
18. Total Measured Depth of Well				19. Plug Back Measured Depth		20. Was Directional Survey Made?		21. Type Electric and Other Logs Run									
7200'				3830'		NO		GR/CCL									
22. Producing Interval(s), of this completion - Top, Bottom, Name GRAYBURG 3648-3804																	
<b>23. CASING RECORD (Report all strings set in well)</b>																	
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED							
NO CHANGE																	
24. LINER RECORD						25. TUBING RECORD											
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET										
					2 3/8"	3820'											
26. Perforation record (interval, size, and number)						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.											
3648, 56, 64, 75, 86, 93, 3703, 18, 30, 40, 55, 69, 90, 3804						<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>DEPTH INTERVAL</td> <td>AMOUNT AND KIND MATERIAL USED</td> </tr> <tr> <td>3648-3804</td> <td>ACIDIZE W/300 GALS 15% NEFE</td> </tr> <tr> <td>3648-3804</td> <td>ACIDIZE W/3000 GALS 15% NEFE</td> </tr> </table>						DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	3648-3804	ACIDIZE W/300 GALS 15% NEFE	3648-3804	ACIDIZE W/3000 GALS 15% NEFE
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<b>28. PRODUCTION</b>																	
Date First Production			Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)										
07/11/2005			PUMPING				PROD										
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio										
07/11/2005	24 HRS			1	22	285											
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.)							30. Test Witnessed By										
SOLD																	
31. List Attachments																	
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.																	
33. If an on-site burial was used at the well, report the exact location of the on-site burial:																	
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																	
Signature			Name			Title			Date								
DENISE PINKERTON			DENISE PINKERTON			REGULATORY SPECIALIST			11-14-2012								
E-mail Address leakejd@chevron.com																	