OCD-HOBBS

Form 3160-4
(April 2004)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO 1004-0137
Expires: March 31, 2007

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No. NM0585088
6. If Indian, Allottee or Tribe Name
7. Unit or CA Agreement Name and No.

1a. Type of Well: [X] Oil Well [ ] Gas Well [ ] Dry [ ] Other
b. Type of Completion: [X] New Well [ ] Work Over [ ] Deepen [ ] Plug Back [ ] Diff. Resvr.
Other

8. Lease Name and Well No. Johns B Fed. #6
2. Name of Operator Chison Ltd.
9. API Well No. 30-025-37212
3. Address 670 Dona Ana Road, SW
3a. Phone No. (include area code) 505-546-8802
10. Field and Pool, or Exploratory Maljamar, Grayburg San Andres
4. Location of Well (Report location clearly and in accordance with Federal requirements)* 510' FEL, 800 FSL Sec. 26 T17s R32E
At surface
11. Sec., T., R., M., on Block and Survey or Area 26 T17s R32E
At top prod. interval reported below 510' FEL, 800FSL Sec. 26 T17s R32E
At total depth
12. County or Parish Lea
13. State NM
14. Date Spudded 7-18-05
15. Date T.D. Reached 7-31-05
16. Date Completed 9-20-05 [ ] D & A [X] Ready to Prod.
17. Elevations (DF, RKB, RT, GL)* DF 3988 KB 3991 GL 3970
18. Total Depth: MD 4848 TVD
19. Plug Back T.D.: MD 4464' TVD
20. Depth Bridge Plug Set: MD 4464' TVD CIBP
21. Type Electric & Other Mechanical Logs Run (Submit copy of each)
22. Was well cored? [X] No [ ] Yes (Submit analysis)
Was DST run? [X] No [ ] Yes (Submit report)
Directional Survey? [X] 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 Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
12 1/4	8 5/8 J	24#	Surface	1223'		578 C		Surface	
7 7/8	5 1/2 J	17#	Surface	5000'		1465 C		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 7/8	4400'							

25. Producing Intervals

Formation	Top	Bottom	26. Perforation Record: Perforated Interval	Size	No. Holes	Perf. Status
A) Grayburg	4188'	4292'	2 SPF		107	
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, etc.

Depth Interval	Amount and Type of Material
4188' to 4292'	2500 gals of 15% HCL Flushed w/ 2% KCL Water.

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
	9-20	24	→	40	10	453	37.4		Pump Jack.

Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status
			→					

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)

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ACCEPTED FOR RECORD
JAN 24 2007
WESLEY W. INGRAM
PETROLEUM ENGINEER

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

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)* JASON Robinson Title Consultant

Signature Jason Robinson Date 3-1-06

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.