

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RECOMPLETION REPORT AND LOGS

RECEIVED
FEB 24 2009
HOBBSOCDFORM APPROVED
OMB NO. 1004-0137
Expires: March 31, 2007

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 NMNM0634-C		
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr., Other _____			6. If Indian, Allottee or Tribe Name		
2. Name of Operator LEWIS B. BURLESON, INC.			7. Unit or CA Agreement Name and no.		
3. Address P.O. BOX 2479 MIDLAND, TEXAS 79702			8. Lease Name and Well No. <5340> T C FEDERAL 4		
3 a Phone No. (Include area code) (432)683-4747			9. API Well No. 30-025-39138		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At Surface 560' FNL AND 2060' FEL Unit B At top prod. interval reported below SAME At total depth SAME			10. Field and Pool, or Exploratory D K ABO <15200>		
14. Date Spudded 11/26/2008			15. Date T.D. Reached 12/16/2008		
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 02/01/2009			17. Elevations (DF, RKB, RT, GL)* 3557.7		

18. Total Depth: MD TVD 7640	19. Plug Back T.D.: MD TVD 7640	20. Depth Bridge Plug Set: MD TVD
21. Type of Electric & Other Mechanical Logs Run (Submit copy of each) GR-N		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 analysis) 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 Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
12 1/4	8-5/8 J-55	24		1680		857 C	270	CIRC	
7-7/8	5-1/2 N80	17		7640		1675 C & H	510	CIRC	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2-3/8	7517							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf Status
A) ABO	7210	7640	7378-7516	3/8	72	OPEN
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
7378-7516	ACID 15,000 GALLONS 20% NEFE

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
2/1/2009	2/1/2009	24	→	50	65	110	38	.675	PUMPING
Choke Size	Tbg. Press. Flwg. SI	Csg. Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
		50	→	50	65	110	1300:1	PRODUCING	
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
FEB 21 2009
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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.)

SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones or 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
TUBB	6633	6842		TUBB	6633
DRINKARD	6842	7138		DRINKARD	6842
ABO	7138	7640		ABO	7138

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.)
 ☐ Geological 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) STEVEN L. BURLESONTitle PRESIDENTSignature Date 2/1/9

Title 18 U.S.C. Section 101 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 and false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.