## Submit to Appropriate District Office State Lease — 6 copies Fee Lease — 5 copies

## State of New Mexico Energy, Minerals and Natural Resources Department

| Form   | C  | 10  | 5   |
|--------|----|-----|-----|
| Revise | ed | 1-1 | -89 |

| State Lease — 6 copies Fee Lease — 5 copies  | _                                |                           |                               |                       | WE                      | WELL API NO.                                     |                                     |                              |  |
|--|----------------------------------|---------------------------|-------------------------------|-----------------------|-------------------------|--|-------------------------------------|------------------------------|--|
| DISTRICT I<br>P.O. Box 1980, Hobbs, NI   | √ 88240 <b>(</b>                 | OIL CONS                  | CONSERVATION DIVISION         |                       |                         | 30-025-01804                                     |                                     |                              |  |
| DISTRICT II  | G . E New Marine 97504 2099      |                           |                               |                       | 5.                      | 5. Indicate Type of Lease STATE FEE X            |                                     |                              |  |
|  | 14141 00210                      |                           |                               |                       | 6.                      | State Oil & G                                    | as Lease No.                        |                              |  |
| DISTRICT III<br>1000 Rio Brazos Rd., Azto  | ec, NM 87410                     |                           |                               |                       |                         |  | ,,,,,,,,,,                          |                              |  |
| WELL COMPLETION OR RECOMPLETION REPORT AND LOG   |                                  |                           |                               |                       |                         |  |                                     |                              |  |
| la Type of Well:   |                                  |                           |                               |                       | 7.                      | 7. Lease Name or Unit Agreement Name McNulty     |                                     |                              |  |
| OIL WELL   | GAS WELL                         | _ DRY                     | OTHER                         |                       | . 7                     | MCNUICY  |                                     |                              |  |
| b. Type of Completion:   |                                  |                           |                               |                       |                         |  |                                     |                              |  |
| WELL OVER  | DEEPEN                           | BACK                      | RESVR X OTHER _               | Reentry               |                         |  |                                     |                              |  |
| 2. Name of Operator  |                                  |                           |                               |                       |                         | 8. Well No.                                      |                                     |                              |  |
| Western Reserves Oil Company Inc.  |                                  |                           |                               |                       | -   6                   | 9. Pool name or Wildcat                          |                                     |                              |  |
| 3. Address of Operator P. O. Box 993, Midland, TX 79702  |                                  |                           |                               |                       | '                       | Jenkins, NW (San Andres)                         |                                     |                              |  |
| 4. Well Location   | OX 993, MIU                      | 1anu, 17 /2               | 7702                          |                       |                         | OCHNIHO  | 140 (30                             | 71101037                     |  |
|  | N : 660                          | East From The             | south                         | Line and              | 980                     | Feet Fro   | m The Wes                           | st Line                      |  |
| Unit Letter  | ::                               | _ rectrion the            |                               |                       |                         |  |                                     |                              |  |
| Section  | 3                                | Township 9                | south Ran                     | ge 34 east            | NM                      |  |                                     | County                       |  |
| 10. Date Spudded 10-29-91  | 11. Date T.D. Reache<br>11-06-91 |                           | ompl. (Ready to Prod<br>16–91 |                       | tions (DF&<br>4 GR      | RKB, RT, GR                                      | etc.) 14.                           | Elev. Casinghead 4273        |  |
| 15. Total Depth  | 16. Plug Back                    | T.D.                      | 17. If Multiple Com           | pl. How 18.           | intervals<br>Drilled By | Rotary Tools                                     | l <sub>C</sub> a                    | ble Tools                    |  |
| 4,763  | 4,700                            |                           | Many Zones?                   |                       |                         | 1 X  |                                     | L Common Mada                |  |
| 19. Producing Interval(s),   | of this completion -             | Top, Bottom, Name         | e                             |                       |                         | l l  | ), <b>was Directio</b><br>es When ( | onal Survey Made             |  |
| 4590-4606:   |                                  |                           |                               |                       |                         | 22. Was Wei                                      |                                     | orrited                      |  |
| 21. Type Electric and Oth Gamma Ray/Ne   | er Logs Run                      |                           | t -                           |                       |                         | No   | Color                               |                              |  |
| 23.  |                                  |                           |                               |                       |                         | L  |                                     |                              |  |
| <i></i>  |                                  |                           | ECORD (Re                     |                       | set in v                | (CAPTING DE                                      | COPD                                | AMOUNT PULLED                |  |
| CASING SIZE  | WEIGHT LB                        | 0.11:                     |                               | 17½                   |                         |  |                                     |                              |  |
| 13 3/8"  | 48<br>24 & 32                    | 431                       |                               |                       |                         | 00 sacks 0                                       |                                     | 1                            |  |
| 8 5/8"<br>5 1/2"   | 17                               |                           |                               |                       | 250                     | ı  |                                     |                              |  |
| 2 17 2-  |                                  |                           |                               |                       |                         |  |                                     |                              |  |
|  |                                  |                           |                               |                       |                         | 77 17  | DIC DEC                             | ORD                          |  |
| 24.  |                                  | LINER RECO                |                               | - Constitution        | 25.                     |  |                                     |                              |  |
| SIZE   | TOP                              | BOTTOM                    | SACKS CEMEN                   | T SCREEN              |                         | <b>SIZE</b><br>7/8                               | 4642                                | NA.                          |  |
|  |                                  |                           | <del> </del>                  |                       |                         | // 0   | 4042                                | 13/4                         |  |
| 26. Perforation reco   | ord (interval, size              | and number)               | <u> </u>                      | 27. ACID              | SHOT,                   | FRACTURI   | E, CEMENT                           | r, squeeze, etc.             |  |
|  |                                  |                           |                               | DEPTH INT             |                         |  |                                     |                              |  |
| 4590-4606, 34 holes, .41" diameter DEPTH INTERVA4590-4606  |                                  |                           |                               |                       |                         | 2,000 gals 15% NEFE HQL                          |                                     |                              |  |
|  |                                  |                           |                               |                       |                         | <del>                                     </del> |                                     |                              |  |
|  |                                  | <u>,</u>                  | PRODUCT                       | TON                   |                         |  |                                     |                              |  |
| 28. Date First Production  |                                  | Production Method         | (Flowing, gas lift, pu        | emping - Size and typ | е ритр)                 |  | Well Statu                          | is (Prod. or Shut-in)        |  |
| 11-16-91   |                                  |                           | x1½"x16' RW                   | BC                    |                         |  | Produc                              | Gas - Oil Ratio              |  |
| Date of Test   | Hours Tested                     | Choke Size                | Prod'n For<br>Test Period     | Oil - Bbl.            | Gas - M                 | t  | Vater - Bbi.                        |                              |  |
| 12-01-91   | 24                               | NA_                       | 1                             | 17<br>Gas - MCF       | 14 w                    | ater - Bbl.                                      | Oil Gravi                           | 824:1<br>ity - API - (Corr.) |  |
| Flow Tubing Press.   | Casing Pressure                  | Calculated :<br>Hour Rate | 24- <b>Oil - Bbl.</b><br>17   | 14                    | "                       | 15   | 20.0                                | • •                          |  |
| NA   | 20                               | ented, etc.)              |                               | 14                    |                         |  | itnessed By                         |                              |  |
| 29. Disposition of Gas (Sold, used for fuel, vented, etc.)  Lease Fuel & vented  Holmes Lovejoy  |                                  |                           |                               |                       |                         |  |                                     |                              |  |
| 30. List Attachments   |                                  |                           |                               |                       |                         |  |                                     |                              |  |
| Gamma Ray/Neutron Log  31. 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 |                                  |                           |                               |                       |                         |  |                                     |                              |  |
| 31. I hereby certify the   | at, the information              | shown on both si          | des of this form is t         | true and complete     | io ine desi             | oj my knowi                                      | cage was ver                        | <del></del> y                |  |
|  | -                                | . 0                       | Printed Chri                  | s Renaud              |                         | itle Engin                                       | eer                                 | Date 12-02-91                |  |
| Signature  | H K K                            |                           | _ Name                        | .s renauu             | T                       | iue <u>Liigii</u>                                |                                     | Date                         |  |