| •                                  |                                       |                             |                                       |                       |  |               |   |                                       |  |  |
|------------------------------------|---------------------------------------|-----------------------------|---------------------------------------|-----------------------|--|---------------|---|---------------------------------------|--|--|
| NO. OF COPIES RECEIV               | ED                                    |                             |                                       |                       |  |               | Form C-1  | 05                                    |  |  |
| DISTRIBUTION                       |                                       |                             |                                       |                       |  |               | Revised 1-1-65                                    |                                       |  |  |
| SANTA FE                           |                                       | NEV                         | MEXICO OIL CO                         | NSERVATION            | COMMISSION                             | 50            | . Indicate 7                                      | Type of Lease                         |  |  |
| FILE                               |                                       |                             | ETION OR REC                          |                       |  | ND LOG        | State   | Fee X                                 |  |  |
| U.S.G.S.                           |                                       |                             |                                       |                       |  | 5.            | State Oil &                                       | Gas Lease No.                         |  |  |
| LAND OFFICE<br>OPERATOR            |                                       |                             |                                       |                       |  |               |   |                                       |  |  |
| OPERATOR                           |                                       |                             |                                       |                       |  |               | //////  |                                       |  |  |
| la. TYPE OF WELL                   |                                       |                             |                                       |                       |  |               | Unit Agree  | ment Name                             |  |  |
|                                    | 011                                   | - GAS                       | LL DRY                                | ר                     |  | [ '           | omit rigioc                                       | mont Manie                            |  |  |
| b. TYPE OF COMPLE                  | TION                                  |                             |                                       | OTHER                 |  | 8.            | Form or Le  | · · · · · · · · · · · · · · · · · · · |  |  |
| NEW WO OVE                         |                                       | EN PLU                      | DIFF.<br>RESVR.                       | OTHER                 |  |               | Beisel  |                                       |  |  |
| Ted Weine                          | or Oil Prope                          | rties & Cent                | ury Petroleum                         | Ltd.                  |  | 9.            | Well No.  |                                       |  |  |
| 3. Address of Operator<br>1616 Oil | & Gas Bldg.                           | , Fort Wort                 | h, Texas 761                          | 02                    |  |               | 10. Field and Pool, or Wildcat  Bluitt San Andres |                                       |  |  |
| 4. Location of Well                |                                       |                             |                                       |                       |  |               | 11111   |                                       |  |  |
| Α                                  |                                       | 660                         | FROM THE Nort                         | th.                   | 660 <sub>-</sub>                       |               |   |                                       |  |  |
| UNIT LETTER                        | LOCATED                               | FEET                        | FROM THE                              | LINE AND              | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | EET FROM      | 2. County   |                                       |  |  |
| THE East LINE OF                   | 5 Ec. 7                               | TWP. <b>8-</b> S            | RGE. 38-E NMP                         |                       |  | /////         | sevelt  |                                       |  |  |
| 15. Date Spudded                   | 16. Date T.D.                         | Reached 17. Da              | te Compl. (Ready to                   | <i>Prod.</i> ) 18. E. |  | KB, RT, GR,   | etc.) 19. E                                       | lev. Cashinghead                      |  |  |
| 20. Total Depth 4,764'             | 1                                     | ug Back T.D.                | 22. If Multip                         | ole Compl., How       |  | Rotary T      |   | Cable Tools                           |  |  |
| 24. Producing Interval(s           | s) of this comple                     | tion To- Date               |                                       |                       |  | <b>→</b> Ye   |   | •                                     |  |  |
|                                    | None                                  | non — Top, Botto            | om, wame                              |                       |  |               | 25.   | , Was Directional Survey<br>Made      |  |  |
| 26. Type Electric and C            | other Logs Run<br>Ima Ray Nei         | utron Log                   | · · · · · · · · · · · · · · · · · · · |                       |  |               | 27. Was   | Well Cored                            |  |  |
| 28.                                |                                       | C                           | ASING RECORD (Re                      | port all strings      | set in well)                           |               |   | . 10                                  |  |  |
| CASING SIZE                        | WEIGHT LB                             | L                           |                                       | LE SIZE               | CEMEN"                                 | ING RECORE    | )   | AMOUNT PULLED                         |  |  |
| 8 5/8" 20 #                        |                                       | 3                           | 350° 10 3                             |                       | 225 sx                                 |               |   | None                                  |  |  |
|                                    |                                       |                             |                                       |                       |  |               |   |                                       |  |  |
| <del></del>                        |                                       |                             |                                       |                       |  |               |   |                                       |  |  |
| 29.                                |                                       | INER RECORD                 |                                       |                       | Tan                                    |               |   |                                       |  |  |
| SIZE                               | T T T T T T T T T T T T T T T T T T T |                             |                                       |                       | 30.                                    |               | ING RECOR   |                                       |  |  |
|                                    |                                       | BOTTOM                      | SACKS CEMENT                          | SCREEN                | SIZE                                   | DEPTH         | ISET  | PACKER SET                            |  |  |
|                                    |                                       |                             |                                       |                       |  |               |   |                                       |  |  |
| 31. Perforation Record (           | Interval, size an                     | d number)                   |                                       | 32. A                 | CID, SHOT, FR                          | ACTURE, CEA   | MENT SQUE   | EZE, ETC.                             |  |  |
|                                    |                                       |                             |                                       |                       | DEPTH INTERVAL AMO                     |               |   | OUNT AND KIND MATERIAL USED           |  |  |
|                                    |                                       |                             |                                       |                       |  |               |   |                                       |  |  |
|                                    |                                       |                             |                                       |                       |  |               |   |                                       |  |  |
|                                    |                                       |                             |                                       | <del></del>           |  |               |   |                                       |  |  |
| 33.                                |                                       |                             | PROD                                  | DUCTION               | <u>L</u> _                             | ····          |   |                                       |  |  |
| Date First Production              | Produ                                 | action Method ( $Fl$        | owing, gas lift, pum                  | ping - Size and       | type pump)                             | W             | ell Status (                                      | Prod. or Shut-in)                     |  |  |
| Date of Test                       | Hours Tested                          | Chaha Sia                   | Davids Bar                            | 0.11                  |  |               |   |                                       |  |  |
| Date of Yest                       | noms rested                           | Choke Size                  | Prod'n. For<br>Test Period            | Oil — Bbl.            | Gas - MCF                              | Water         | Bbl.  | Gas — Oil Ratio                       |  |  |
| Flow Tubing Press.                 | Casing Pressur                        | e Calculated 2<br>Hour Rate | 24- Oil - Bbl.                        | Gas — MC              | CF Wate                                | r – Bbl.      | Oil Gr  | avity - API (Corr.)                   |  |  |
| 34. Disposition of Gas (           | Sold, used for fu                     | el, vented, etc.)           | 11                                    |                       |  | Test Wit      | nessed By   |                                       |  |  |
| 25 14-4-5 34-1                     | ·                                     |                             |                                       | <u></u>               |  |               | 1   |                                       |  |  |
| 35. List of Attachments            |                                       |                             |                                       |                       |  |               |   |                                       |  |  |
| 36. I hereby certify that          | the information s                     | shown on both sid           | les of this form is tru               | ue and complete       | to the best of m                       | y knowledge a | nd belief.  |                                       |  |  |
| 1                                  | A AA                                  | /.                          |                                       | 0-4-1                 | <b>.</b>                               |               |   |                                       |  |  |
| SIGNED                             | - Colles                              | 4                           | TITLE                                 | Petroleum             | Engineer                               | DA            | TE 2-14   | -/3                                   |  |  |

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It 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 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

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

## Northwestern New Mexico Southeastern New Mexico 2420 \_\_\_\_ T. Penn. "B"\_ \_\_\_\_\_ T. Ojo Alamo \_\_ T. Canyon \_\_\_\_ T. Anhy T. Strawn \_\_\_\_\_ T. Kirtland-Fruitland \_\_\_\_ T. Penn. "C" \_\_\_ 2490 T. Salt. Atoka \_\_\_\_\_\_ T. Pictured Cliffs \_\_\_\_\_ T. Penn. "D" \_\_\_\_\_ \_\_\_\_ T. Salt. T. Cliff House \_\_\_\_\_ T. Leadville \_\_\_\_ \_\_\_\_ T. Miss \_\_\_ T. Devonian \_\_\_\_\_\_T. Menefee \_\_\_\_\_T. Madison \_\_\_ Т. 7 Rivers .... T. Silurian \_\_\_\_\_ T. Point Lookout \_\_\_\_ T. Elbert \_\_ T. Grayburg 3580 T. Montoya \_\_\_\_\_T. Mancos \_ T: McCracken \_\_\_ T. Simpson \_\_\_\_\_\_ T. Gallup \_\_\_\_\_ T. Ignacio Qtzte \_\_\_\_ San Andres 3910 \_\_\_\_\_Т Base Greenhorn \_\_\_\_\_\_ T. Granite \_ \_\_\_\_\_T. McKee \_\_\_ Glorieta \_\_\_ т. — T. Ellenburger \_\_\_\_\_ T. Dakota \_\_\_\_ Paddock \_\_\_ \_\_\_\_\_\_ T. Morrison \_\_\_\_\_ T. \_\_\_ Blinebry \_\_\_\_\_ T. Gr. Wash \_\_\_ Т. Drinkard \_\_\_\_\_\_ T. Delaware Sand \_\_\_\_\_ T. Entrada \_\_\_\_\_ T. \_\_\_\_\_ T. \_\_\_\_ T. Bone Springs \_\_\_\_\_ T. Wingate \_\_\_\_ Wolfcamp \_\_\_\_\_ T. \_\_\_\_ T. Chinle \_\_\_\_\_ T. \_\_\_\_ T. \_\_\_\_\_T. \_\_\_\_\_T. \_\_\_\_\_T. T. Penn. \_\_\_ T Cisco (Bough C) \_\_\_\_\_ T. \_\_\_\_ T. Penn. "A" \_\_\_\_\_ T. \_\_\_\_

## FORMATION RECORD (Attach additional sheets if necessary)

| From | То   | Thickness<br>in Feet | Formation | From | То | Thickness<br>in Feet | Formation |
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