

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR SUNDANCE OIL COMPANY						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Suite 510, 1776 Lincoln St., Denver, CO 80203						8. FARM OR LEASE NAME Ingram Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 554' FNL, 554' FEL Unit A At top prod. interval reported below At total depth Same						9. WELL NO. 1-Y	
14. PERMIT NO.						DATE ISSUED 9/20/78	
15. DATE SPUDDED 9/23/78						16. DATE T.D. REACHED 10/4/78	
17. DATE COMPL. (Ready to prod.) 11/13/78						18. ELEVATIONS (DF, RKB, RT, GR, ETC.) 4263' GL	
19. ELEV. CASINGHEAD Same						20. TOTAL DEPTH, MD & TVD 3995'	
21. PLUG, BACK T.D., MD & TVD 3968						22. IF MULTIPLE COMPL., HOW MANY Single	
23. INTERVALS DRILLED BY ROTARY TOOL						24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3858-3901', San Andres Formation	
25. TYPE ELECTRIC AND OTHER LOGS RUN Schlumberger SNP, DLL-MSFL						26. WAS WELL CORED No	

27. COUNTY OR PARISH Chaves		28. STATE New Mexico	
29. Casing Record (Report all strings set in well)		30. Tubing Record	
Casing Size	Weight, lb./ft.	Depth Set (MD)	Hole Size
8 5/8"	23#	1505'	12 1/4"
7"	20#	2166	7 7/8"
4 1/2"	10.5#	3995'	7 7/8"
31. Perforation Record (Interval, size and number)		32. Acid, Shot, Fracture, Cement Squeeze, Etc.	
3901-3911 w/2 spf		Depth Interval (MD)	
3858-3870 w/2 spf		Amount and Kind of Material Used	
3875-3878 w/2 spf		3901-3911 2500 gal. 20% DS-30+40 ball sealer	
		3858-3878 2900 gal. 20% DS-30+36 ball sealer	
		3858-3878 5000 gal. 20% DS-30+60 ball sealer	

33. PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
DATE FIRST PRODUCTION 11/3/78	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping	TEST WITNESSED BY Jim Akin	
DATE OF TEST 11/12/78	HOURS TESTED 24	CHOKE SIZE N/A	PROD'N. FOR TEST PERIOD 44
FLOW. TUBING PRESS. N/A	CASING PRESSURE N/A	CALCULATED 24-HOUR RATE 44	GAS—MCF. 8
35. LIST OF ATTACHMENTS		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	

37. PRODUCTION		38. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
DATE FIRST PRODUCTION 11/3/78	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping	TEST WITNESSED BY Jim Akin	
DATE OF TEST 11/12/78	HOURS TESTED 24	CHOKE SIZE N/A	PROD'N. FOR TEST PERIOD 44
FLOW. TUBING PRESS. N/A	CASING PRESSURE N/A	CALCULATED 24-HOUR RATE 44	GAS—MCF. 8
39. LIST OF ATTACHMENTS		40. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	

41. PRODUCTION		42. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
DATE FIRST PRODUCTION 11/3/78	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping	TEST WITNESSED BY Jim Akin	
DATE OF TEST 11/12/78	HOURS TESTED 24	CHOKE SIZE N/A	PROD'N. FOR TEST PERIOD 44
FLOW. TUBING PRESS. N/A	CASING PRESSURE N/A	CALCULATED 24-HOUR RATE 44	GAS—MCF. 8
43. LIST OF ATTACHMENTS		44. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	

45. PRODUCTION		46. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
DATE FIRST PRODUCTION 11/3/78	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping	TEST WITNESSED BY Jim Akin	
DATE OF TEST 11/12/78	HOURS TESTED 24	CHOKE SIZE N/A	PROD'N. FOR TEST PERIOD 44
FLOW. TUBING PRESS. N/A	CASING PRESSURE N/A	CALCULATED 24-HOUR RATE 44	GAS—MCF. 8
47. LIST OF ATTACHMENTS		48. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 16: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: 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				38. (GEOLOGIC) MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TIME VERT. DEPTH
No DST's were run.				Rustler	1495'	Same
				Salado	1550'	Same
				Yates	1975'	Same
				San Andres	3196'	Same
				Pi Marker	3544'	Same
				P-1	3702'	Same
				P-2	3784'	Same
				P-3	3886'	Same

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O.C.C. OFFICE

DECEMBER