

**CONFIDENTIAL**  
**N. M. OIL CONS. COMMISSION**  
**P. O. BOX 1980**  
**HOBBS, NEW MEXICO 88401**  
**DEPARTMENT OF THE INTERIOR**  
**BUREAU OF LAND MANAGEMENT**

Form approved.  
Budget Bureau No. 1004-0137  
Expires August 31, 1985

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG \***

|                                                                                                                                                                                                                                                      |  |                                                                                   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------|--|
| <b>1a. TYPE OF WELL:</b> <u>WELL</u> <input checked="" type="checkbox"/> <u>10-25-93</u> <input type="checkbox"/> DRY <input type="checkbox"/> Other _____                                                                                           |  | <b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b><br>_____                              |  |
| <b>b. TYPE OF COMPLETION:</b><br>NEW WELL <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESRV. <input type="checkbox"/> Other <u>Recomplete Dry Hole</u>     |  | <b>7. UNIT AGREEMENT NAME</b><br>_____                                            |  |
| <b>2. NAME OF OPERATOR</b><br><u>Petroleum Development Corporation</u>                                                                                                                                                                               |  | <b>8. FARM OR LEASE NAME</b><br><u>Wattam Federal</u>                             |  |
| <b>3. ADDRESS OF OPERATOR</b><br><u>9720-B Candelaria NE, Albuquerque, NM 87112</u>                                                                                                                                                                  |  | <b>9. WELL NO.</b><br><u>4</u>                                                    |  |
| <b>4. LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements).<br>At surface <u>1060' FNL and 598' FEL of Section 6, T8S, R30E</u><br><u>2060</u><br>At top prod. interval reported below<br><br>At total depth |  | <b>10. FIELD AND POOL, OR WILDCAT</b><br><u>Cato-San Andres</u>                   |  |
| <b>14. PERMIT NO.</b> _____ <b>DATE</b> _____                                                                                                                                                                                                        |  | <b>11. SEC. T. R. M., OR BLOCK AND SURVEY OR AREA</b><br><u>Sec. 6, T8S, R31E</u> |  |
| <b>15. DATE SPUDDED</b><br><u>3-28-93</u>                                                                                                                                                                                                            |  | <b>13. STATE</b><br><u>NM</u>                                                     |  |
| <b>16. DATE T.D. REACHED</b><br><u>5-18-93</u>                                                                                                                                                                                                       |  | <b>12. COUNTY OR PARISH</b><br><u>Chaves</u>                                      |  |
| <b>17. DATE COMPL. (Ready to produce)</b><br><u>6-5-93</u>                                                                                                                                                                                           |  | <b>19. ELEV. CASINGHEAD</b><br><u>4220 GR</u>                                     |  |
| <b>20. TOTAL DEPTH, MD &amp; TVD</b><br><u>4290'</u>                                                                                                                                                                                                 |  | <b>23. INTERVALS DRILLED BY</b><br>_____                                          |  |
| <b>21. PLUG BACK T.D., MD &amp; TVD</b><br><u>4290'</u>                                                                                                                                                                                              |  | <b>22. IF MULTIPLE COMPL., HOW MANY*</b><br>_____                                 |  |
| <b>24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*</b><br><u>3722' to 3764'</u>                                                                                                                                        |  | <b>25. WAS DIRECTIONAL SURVEY MADE</b><br><u>yes</u>                              |  |
| <b>26. TYPE ELECTRIC AND OTHER LOGS RUN</b><br><u>CNL-GR, DLL-MSFL</u>                                                                                                                                                                               |  | <b>27. WAS WELL CORED</b><br><u>no</u>                                            |  |

| 28. CASING RECORD (Report all strings set in well) |                 |                |           |                  |               |
|----------------------------------------------------|-----------------|----------------|-----------|------------------|---------------|
| CASING SIZE                                        | WEIGHT, LB./FT. | DEPTH SET (MD) | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
| 8-5/8"                                             | 24              | 1289           | 12 1/4"   | 850 sx.          |               |
| 5-1/2"                                             | 14              | 3900           | 7-7/8"    | 1650 sx.         |               |
|                                                    |                 |                |           |                  |               |
|                                                    |                 |                |           |                  |               |

| 29. LINER RECORD |          |             |               |             | 30. TUBING RECORD |                |                 |
|------------------|----------|-------------|---------------|-------------|-------------------|----------------|-----------------|
| SIZE             | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) | SIZE              | DEPTH SET (MD) | PACKER SET (MD) |
|                  |          |             |               |             | 2-7/8"            | 3650'          |                 |
|                  |          |             |               |             |                   |                |                 |
|                  |          |             |               |             |                   |                |                 |

| 31. PERFORATION RECORD (Interval, size and number)                          |  | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. |                                  |
|-----------------------------------------------------------------------------|--|------------------------------------------------|----------------------------------|
| Open hole completion. 3665' to 4290'<br>horizontal lateral. (3722' - 3764') |  | DEPTH INTERVAL (MD)                            | AMOUNT AND KIND OF MATERIAL USED |
|                                                                             |  |                                                | 7,000 gal. 20% acid              |
|                                                                             |  |                                                |                                  |
|                                                                             |  |                                                |                                  |

| 33. PRODUCTION        |                 |                                                                      |                         |          |            |                                    |               |
|-----------------------|-----------------|----------------------------------------------------------------------|-------------------------|----------|------------|------------------------------------|---------------|
| DATE FIRST PRODUCTION |                 | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) |                         |          |            | WELL STATUS (Producing or shut-in) |               |
| 6-4-93                |                 | Swab and flow                                                        |                         |          |            | shut in                            |               |
| DATE OF TEST          | HOURS TESTED    | CHOKE SIZE                                                           | PROD'N. FOR TEST PERIOD | OIL—BBL. | GAS—MCF.   | WATER—BBL.                         | GAS-OIL RATIO |
| 6-5-93                | 12              |                                                                      |                         | 82       | TSTM       | 96                                 |               |
| FLOW. TUBING PRESS.   | CASING PRESSURE | CALCULATED 24-HOUR RATE                                              | OIL—BBL.                | GAS—MCF. | WATER—BBL. | OIL GRAVITY-API (CORR.)            |               |
|                       | 190             |                                                                      | 164                     | TSTM     | 192        | 26                                 |               |

|                                                            |  |                   |  |
|------------------------------------------------------------|--|-------------------|--|
| 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) |  | TEST WITNESSED BY |  |
| Vented                                                     |  | J.C. Johnson      |  |

|                         |  |
|-------------------------|--|
| 35. LIST OF ATTACHMENTS |  |
| Directional surveys     |  |

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED J.C. Johnson JUN 17 1993 President DATE 6-7-93

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

| FORMATION | TOP | BOTTOM | DESCRIPTION, CONTENTS, ETC. | NAME | TOP         |                  |
|-----------|-----|--------|-----------------------------|------|-------------|------------------|
|           |     |        |                             |      | MEAS. DEPTH | TRUE VERT. DEPTH |
|           |     |        |                             |      |             |                  |

RECEIVED

JUN 21 1993

JOHNS HOPKINS  
UNIVERSITY

100-443885-100