

UNITED STATES OF AMERICA
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NEW MEXICO 88240

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RENVR. ☐ Other Re-entry

2. NAME OF OPERATOR
Hexagon Oil and Gas Inc.

3. ADDRESS OF OPERATOR
1800 W.T.Waggoner Bldg., 810 Houston St., Ft. Worth, TX 76102

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 460' FSL & 660' FEL
At top prod. interval reported below
At total depth

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUDDED 6/22/88 16. DATE T.D. REACHED 6/23/88 17. DATE COMPL. (Ready to prod.) _____ 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4227' GR; 4240' KB 19. ELEV. CASINGHEAD _____

20. TOTAL DEPTH, MD & TVD 2286' 21. PLUG, BACK T.D., MD & TVD 2286' 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS X CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
Dry Hole
25. WAS DIRECTIONAL SURVEY MADE N/A

26. TYPE ELECTRIC AND OTHER LOGS RUN
Re-entry - CBL
27. WAS WELL CORED No

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
4-1/2	9.5#	2286'	7-7/8	225 sxs. "D" 50/50 Poz	1721'

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2010' - 2018' and 2228' - 2238'		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
Plugged and Abandoned			

33.* PRODUCTION							
DATE FIRST PRODUCTION N/A		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in) P & A	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASINO PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) _____ TEST WITNESSED BY _____

35. LIST OF ATTACHMENTS _____

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

SIGNED John G. Burke TITLE Vice President DATE 1/05/90

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