

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____				7. UNIT AGREEMENT NAME -			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				8. FARM OR LEASE NAME West Corbin			
2. NAME OF OPERATOR Southland Royalty Company				9. WELL NO. 4			
3. ADDRESS OF OPERATOR 1100 Wall Towers West, Midland, TX 79701				10. FIELD AND POOL, OR WILDCAT West Corbin Delaware			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2310' FS&EL, Sec. 18, T-18-S, R-33-E At top prod. interval reported below Same At total depth Same				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 18, T-18-S, R-33-E			
		14. PERMIT NO. -		DATE ISSUED -		12. COUNTY OR PARISH Lea	
						13. STATE New Mexico	
15. DATE SPUDDED 2-4-78		16. DATE T.D. REACHED 2-17-78		17. DATE COMPL. (Ready to prod.) Dry hole		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3848.4' K.B.	
19. ELEV. CASINGHEAD -							
20. TOTAL DEPTH, MD & TVD 5117'		21. PLUG, BACK T.D., MD & TVD 5112'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY → 0-5117'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* None						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Comp. Neutron-Formation Density (Schl.), DLL Micro-SFL						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	
8 5/8"	24#	340'	12 1/4"	250 sx		Circ.	
5 1/2"	14#	5117'	7 7/8"	1st stage: 500 sx		None	
				2d stage: 200 sx			
				DV tool @ 1443'			
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					-		
31. PERFORATION RECORD (Interval, size and number) 5032-5062' - 1 SPF				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD) 5032-5062'		AMOUNT AND KIND OF MATERIAL USED 3000 gal. acid	
33.* PRODUCTION							
DATE FIRST PRODUCTION -		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Swabbed 100% formation water				WELL STATUS (Producing or shut-in) Shut-in	
DATE OF TEST 3-18-78	HOURS TESTED 8	CHOKE SIZE -	PROD'N. FOR TEST PERIOD →	OIL—BBL. None	GAS—MCF. None	WATER—BBL. 44	GAS-OIL RATIO -
FLOW, TUBING PRESS. -	CASING PRESSURE -	CALCULATED 24-HOUR RATE →	OIL—BBL. None	GAS—MCF. None	WATER—BBL. 132	OIL GRAVITY-API (CORR.) -	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) -						TEST WITNESSED BY	
35. LIST OF ATTACHMENTS Schlumberger CNL-FDC & DLL-MSFL logs.							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED <i>C. Harney Can</i>				TITLE District Engineer		DATE 3-17-78	

* (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 18: 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	TRUE VERT. DEPTH
Delaware Sand	5032	5062	Swabbed 100% water, 44 bbls/8 hrs. No show of oil or gas	Rustler Top Salt Base Salt Yates Queen Grayburg San Andres	1353 1500 2660 2850 4065 4370 4830	