

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

Southeastern New Mexico

Northwestern New Mexico

| | | | |
|--------------------------|------------------------|-----------------------------|-------------------------|
| T. Anhy _____ | T. Canyon _____ | T. Ojo Alamo _____ | T. Penn. "B" _____ |
| T. Salt _____ | T. Strawn _____ | T. Kirtland-Fruitland _____ | T. Penn. "C" _____ |
| B. Salt _____ | T. Atoka _____ | T. Pictured Cliffs _____ | T. Penn. "D" _____ |
| T. Yates _____ | T. Miss _____ | T. Cliff House _____ | T. Leadville _____ |
| T. 7 Rivers _____ | T. Devonian _____ | T. Menefee _____ | T. Madison _____ |
| T. Queen _____ | T. Silurian _____ | T. Point Lookout _____ | T. Elbert _____ |
| T. Grayburg _____ | T. Montoya _____ | T. Mancos _____ | T. McCracken _____ |
| T. San Andres _____ | T. Simpson _____ | T. Gallup _____ | T. Ignacio Qtzite _____ |
| T. Glorieta _____ | T. McKee _____ | Base Greenhorn _____ | T. Granite _____ |
| T. Paddock _____ | T. Ellenburger _____ | T. Dakota _____ | T. _____ |
| T. Blinebry _____ | T. Gr. Wash _____ | T. Morrison _____ | T. _____ |
| T. Tubb _____ | T. Granite _____ | T. Todilto _____ | T. _____ |
| T. Drinkard _____ | T. Delaware Sand _____ | T. Entrada _____ | T. _____ |
| T. Abo _____ | T. Bone Springs _____ | T. Wingate _____ | T. _____ |
| T. Wolfcamp _____ | T. _____ | T. Chinle _____ | T. _____ |
| T. Penn. _____ | T. _____ | T. Permian _____ | T. _____ |
| T. Cisco (Bough C) _____ | T. _____ | T. Penn. "A" _____ | T. _____ |

OIL OR GAS SANDS OR ZONES

No. 1, from.....to..... No. 4, from.....to.....
No. 2, from.....to..... No. 5, from.....to.....
No. 3, from.....to..... No. 6, from.....to.....

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.

No. 2, from.....to.....feet.

No. 3, from.....to.....feet.

No. 4, from.....to.....feet.

FORMATION RECORD (Attach additional sheets if necessary)

| From | To | Thickness in Feet | Formation | From | To | Thickness in Feet | Formation |
|------|----|----------------------|-----------|------|----|----------------------|-----------|
| | | | | | | | |

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**NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

Form C-105
Revised 11-1-84

| | |
|------------------------------|--|
| 5a. Indicate Type of Lease | State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No. | LG-1543 |

| | |
|-----------------------|---|
| 1a. TYPE OF WELL | <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <u>Salt Water Disposal Well</u> |
| b. TYPE OF COMPLETION | <input type="checkbox"/> NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER |

7. Unit Agreement Name

8. Farm or Lease Name
State DW

9. Well No.
4

10. Field and Pool, or Wildcat
Undesign. San Andres

2. Name of Operator
Cities Service Oil and Gas Corporation

3. Address of Operator
P.O. Box 1919 - Midland, Texas 79702

4. Location of Well
UNIT LETTER F LOCATED 1880 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE OF SEC. 12 TWP. 18S RGE. 33E

11. County
Lea

15. Date Spudded
7-18-85

16. Date T.D. Reached
8-02-85

17. Date Compl. (Ready to Prod.)
8-02-85

18. Elevations (DF, RKB, RT, GR, etc.)
4105' GR

19. Elev. Casinghead
4105'

20. Total Depth
9050'

21. Plug Back T.D.
6645'

22. If Multiple Compl., How Many

23. Intervals Drilled By
Rotary Tools Cable Tools

24. Producing Interval(s), of this completion - Top, Bottom, Name
5546 - 5730' - San Andres

25. Was Directional Survey Made

26. Type Electric and Other Logs Run

27. Was Well Cored

| 28. CASING RECORD (Report all strings set in well) | | | | | |
|--|-----------------|-----------|-----------|------------------|---------------|
| CASING SIZE | WEIGHT LB./ FT. | DEPTH SET | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
| 13-3/8" | 48# | 350' | 17-1/2" | 500 sacks | Circulated |
| 8-5/8" | 24 & 32# | 3275' | 11" | 1500 sacks | Circulated |
| 5-1/2" | 15.5 & 17# | 9050' | 7-7/8" | 1925 sacks | TOC @ 2700' |

| 29. LINER RECORD | | | | | 30. TUBING RECORD | | |
|------------------|-----|--------|--------------|--------|-------------------|-----------|------------|
| SIZE | TOP | BOTTOM | SACKS CEMENT | SCREEN | SIZE | DEPTH SET | PACKER SET |
| | | | | | 2-7/8" | 5449' | 5449' |

31. Perforation Record (Interval, size and number)
50 holes @ 5546 thru 5570', 230 holes @ 5584 thru 5698' and 38 holes @ 5712 thru 5730'

| 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. | |
|--|-------------------------------|
| DEPTH INTERVAL | AMOUNT AND KIND MATERIAL USED |
| 5546 - 5730' | 15,000 gals 15% NeFe acid |
| | |
| | |

| | | | | | | | |
|--|---|-------------------------|-------------------------|------------|--------------|---|-----------------|
| 33. PRODUCTION | | | | | | | |
| Date First XXXXXX Disposal 8-02-85 | Production Method (Flowing, gas lift, pumping - Size and type pump) Salt Water Disposal Well | | | | | Well Status (Prod. or Shut-in) Disposing | |
| Date of Test 8-02-85 | Hours Tested | Choke Size | Prod'n. For Test Period | Oil - Bbl. | Gas - MCF | Water - Bbl. | Gas - Oil Ratio |
| | | | | | | 1 BPM @ | 1000# |
| Flow Tubing Press. | Casing 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
S. C. Nichols

35. List of Attachments

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED Elmer Startz TITLE Reg. Opr. Mgr. - Prod. DATE 8-05-85