

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

|                                           |                              |
|-------------------------------------------|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |
| LG-1125                                   |                              |

|                        |  |
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|                                                                                                                                         |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  |                                |  |                 |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------|--|------------------------------------|--|------------------------------------------------|--|------------------------------------|--|---------------------------------------|--|--------------------------------|--|-----------------|--|--|--|
| 1a. TYPE OF WELL                                                                                                                        |  | OIL WELL <input checked="" type="checkbox"/>                        |  | GAS WELL <input type="checkbox"/>  |  | DRY <input type="checkbox"/>                   |  | OTHER <input type="checkbox"/>     |  |                                       |  |                                |  |                 |  |  |  |
| b. TYPE OF COMPLETION                                                                                                                   |  | 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 <input type="checkbox"/> |  |                 |  |  |  |
| 2. Name of Operator                                                                                                                     |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  | 7. Unit Agreement Name         |  |                 |  |  |  |
| Général Operating Company                                                                                                               |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  | -                              |  |                 |  |  |  |
| 3. Address of Operator                                                                                                                  |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  | 8. Farm or Lease Name          |  |                 |  |  |  |
| Suite 1007 Ridglea Bank Building, Fort Worth, TX 76116                                                                                  |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  | Santa Fe State                 |  |                 |  |  |  |
| 4. Location of Well                                                                                                                     |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  | 9. Well No.                    |  |                 |  |  |  |
|                                                                                                                                         |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  | 2                              |  |                 |  |  |  |
| 10. Field and Pool, or Wildcat                                                                                                          |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  | 11. County                     |  |                 |  |  |  |
| E-K Yates-SR-Queen                                                                                                                      |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  | Lea                            |  |                 |  |  |  |
| UNIT LETTER <u>A</u> LOCATED <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM                                        |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  |                                |  |                 |  |  |  |
| THE <u>East</u> LINE OF SEC. <u>18</u> TWP. <u>18S</u> RGE. <u>34E</u> NMPM                                                             |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  |                                |  |                 |  |  |  |
| 15. Date Spudded                                                                                                                        |  | 16. Date T.D. Reached                                               |  | 17. Date Compl. (Ready to Prod.)   |  | 18. Elevations (DF, RKB, RT, GR, etc.)         |  | 19. Elev. Casinghead               |  |                                       |  |                                |  |                 |  |  |  |
| 1/12/86                                                                                                                                 |  | 1/20/86                                                             |  | 7/24/86                            |  | 4078.2' GR, 4088.2' RKB                        |  | 4077'                              |  |                                       |  |                                |  |                 |  |  |  |
| 20. Total Depth                                                                                                                         |  | 21. Plug Back T.D.                                                  |  | 22. If Multiple Compl., How Many   |  | 23. Intervals Drilled By                       |  | Rotary Tools                       |  | Cable Tools                           |  |                                |  |                 |  |  |  |
| 4800' RKB                                                                                                                               |  | 4700' RKB                                                           |  | Single                             |  | 0-4800'                                        |  |                                    |  | None                                  |  |                                |  |                 |  |  |  |
| 24. Producing Interval(s), of this completion - Top, Bottom, Name                                                                       |  |                                                                     |  |                                    |  |                                                |  |                                    |  | 25. Was Directional Survey Made       |  |                                |  |                 |  |  |  |
| 4400'-15' RKB, Upper Queen Sand                                                                                                         |  |                                                                     |  |                                    |  |                                                |  |                                    |  | No                                    |  |                                |  |                 |  |  |  |
| 26. Type Electric and Other Logs Run                                                                                                    |  |                                                                     |  |                                    |  |                                                |  |                                    |  | 27. Was Well Cored                    |  |                                |  |                 |  |  |  |
| Welex Compensated Density Dual Spaced Neutron                                                                                           |  |                                                                     |  |                                    |  |                                                |  |                                    |  | No                                    |  |                                |  |                 |  |  |  |
| 28. CASING RECORD (Report all strings set in well)                                                                                      |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  |                                |  |                 |  |  |  |
| CASING SIZE                                                                                                                             |  | WEIGHT LB./ FT.                                                     |  | DEPTH SET                          |  | HOLE SIZE                                      |  | CEMENTING RECORD                   |  | AMOUNT PULLED                         |  |                                |  |                 |  |  |  |
| 8-5/8" OD                                                                                                                               |  | 24                                                                  |  | 1700' RKB                          |  | 12-1/4" & 11"                                  |  | See Attachment                     |  | None                                  |  |                                |  |                 |  |  |  |
| 4-1/2" OD                                                                                                                               |  | 10.5                                                                |  | 4800' RKB                          |  | 7-7/8"                                         |  | See Attachment                     |  | None                                  |  |                                |  |                 |  |  |  |
| 29. LINER RECORD                                                                                                                        |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  | 30. TUBING RECORD              |  |                 |  |  |  |
| SIZE                                                                                                                                    |  | TOP                                                                 |  | BOTTOM                             |  | SACKS CEMENT                                   |  | SCREEN                             |  | SIZE                                  |  | DEPTH SET                      |  | PACKER SET      |  |  |  |
|                                                                                                                                         |  |                                                                     |  |                                    |  |                                                |  |                                    |  | 2-3/8" OD                             |  | 4432' (SN)                     |  | None            |  |  |  |
| 31. Perforation Record (Interval, size and number)                                                                                      |  |                                                                     |  |                                    |  | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. |  |                                    |  |                                       |  |                                |  |                 |  |  |  |
| 4400'-15' RKB w/31-3/8" Holes                                                                                                           |  |                                                                     |  |                                    |  | DEPTH INTERVAL                                 |  |                                    |  |                                       |  | AMOUNT AND KIND MATERIAL USED  |  |                 |  |  |  |
|                                                                                                                                         |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  | See Attachment                 |  |                 |  |  |  |
| 33. PRODUCTION                                                                                                                          |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  |                                |  |                 |  |  |  |
| Date First Production                                                                                                                   |  | Production Method (Flowing, gas lift, pumping - Size and type pump) |  |                                    |  |                                                |  |                                    |  | Well Status (Prod. or Shut-in)        |  |                                |  |                 |  |  |  |
| 7/27/86                                                                                                                                 |  | Pumping w/2" x 1-1/2" x 16' Rod Pump                                |  |                                    |  |                                                |  |                                    |  | Producing                             |  |                                |  |                 |  |  |  |
| Date of Test                                                                                                                            |  | Hours Tested                                                        |  | Choke Size                         |  | Prod'n. For Test Period                        |  | Oil - Bbl.                         |  | Gas - MCF                             |  | Water - Bbl.                   |  | Gas - Oil Ratio |  |  |  |
| 8/1/86                                                                                                                                  |  | 24                                                                  |  | None                               |  |                                                |  | 41                                 |  | 80                                    |  | 2                              |  | 1951:1          |  |  |  |
| Flow Tubing Press.                                                                                                                      |  | Casing Pressure                                                     |  | Calculated 24-Hour Rate            |  | Oil - Bbl.                                     |  | Gas - MCF                          |  | Water - Bbl.                          |  | Oil Gravity - API (Corr.)      |  |                 |  |  |  |
| Pumping                                                                                                                                 |  | 20 psi                                                              |  |                                    |  | 41                                             |  | 80                                 |  | 2                                     |  | 36 (Estimated)                 |  |                 |  |  |  |
| 34. Disposition of Gas (Sold, used for fuel, vented, etc.)                                                                              |  |                                                                     |  |                                    |  |                                                |  |                                    |  | Test Witnessed By                     |  |                                |  |                 |  |  |  |
| Vented-Conoco, Inc. to submit contract                                                                                                  |  |                                                                     |  |                                    |  |                                                |  |                                    |  | Homer Saenz                           |  |                                |  |                 |  |  |  |
| 35. List of Attachments                                                                                                                 |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  |                                |  |                 |  |  |  |
| WEK Drilling Co., Inc. Deviation Survey and Welex CD-DSN.                                                                               |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  |                                |  |                 |  |  |  |
| 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. |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  |                                |  |                 |  |  |  |
| C. W. Stumhoffer                                                                                                                        |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  |                                |  |                 |  |  |  |
| SIGNED                                                                                                                                  |  |                                                                     |  | TITLE                              |  |                                                |  | DATE                               |  |                                       |  |                                |  |                 |  |  |  |
|                                                                                                                                         |  |                                                                     |  | Vice-President                     |  |                                                |  | August 12, 1986                    |  |                                       |  |                                |  |                 |  |  |  |
| C. W. Stumhoffer                                                                                                                        |  |                                                                     |  |                                    |  |                                                |  |                                    |  |                                       |  |                                |  |                 |  |  |  |

# INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 30 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 1770' RKB     | T. Canyon        | T. Ojo Alamo          | T. Penn. "B"     |
| T. Salt 1882' RKB     | T. Strawn        | T. Kirtland-Fruitland | T. Penn. "C"     |
| T. Salt 3051' RKB     | T. Atoka         | T. Pictured Cliffs    | T. Penn. "D"     |
| T. Yates 3166' RKB    | T. Miss          | T. Cliff House        | T. Leadville     |
| T. 7 Rivers 3470' RKB | T. Devonian      | T. Menefee            | T. Madison       |
| T. Queen 4368' RKB    | T. Silurian      | T. Point Lookout      | T. Elbert        |
| T. Grayburg           | T. Montoya       | T. Mancos             | T. McCracken     |
| T. San Andres         | T. Simpson       | T. Gallup             | T. Ignacio Qtzte |
| T. Glorieta           | T. McKee         | Base Greenhorn        | T. Granite       |
| T. Paddock            | T. Ellenburger   | T. Dakota             | T.               |
| T. Blinberry          | 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 |
|-------|-------|-------------------|------------------|------|----|-------------------|-----------|
| 1770' | 1882' | 112'              | Anhydrite        |      |    |                   |           |
| 1882' | 3051' | 1169'             | Salt             |      |    |                   |           |
| 3051' | 3166' | 115'              | Tansill Dolomite |      |    |                   |           |
| 3166' | 3470' | 304'              | Yates            |      |    |                   |           |
| 3470' | 4368' | 898'              | Seven Rivers     |      |    |                   |           |
| 4368' | TD    | 432'              | Queen            |      |    |                   |           |

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