Submit to Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies

C

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-105 Revised 1-1-89

| DISTRICT L  P.O. Box 1980, Hobbs,                             | NM 88240                    |             | ONCI        | PDVAT                               | 'ION    | J DIV                      | ICIA               |   | ELL API NO.                             | 20.005                  | 25256              |                          |  |  |
|---|-----------------------------|-------------|-------------|-------------------------------------|---------|----------------------------|--------------------|---|---|-------------------------|--------------------|--------------------------|--|--|
| DISTRICT IL   |                             |             |             | SERVATION DIVISION 2040 Pacheco St. |         |                            |                    | _ · <del>                                  </del> | 30-025-35376  5. Indicate Type Of Lease |                         |                    |                          |  |  |
| P.O. Drawer DD, Artes   | ta Fe, NM 87505             |             |             |                                     | _       | STATE FEE X                |                    |   |   |                         |                    |                          |  |  |
| DISTRICT III<br>1000 Rio Brazos Rd., A                        | Aztec, NM 87410             |             |             |                                     |         |                            |                    |   | . State Off & C                         | ras Lease No            |                    |                          |  |  |
| WELL CO   | MPLETION OR                 | RECOM       | PLETIC      | ON REPO                             | RT AI   | ND LOG                     | à                  |   |   |                         |                    |                          |  |  |
| la. Type of Well: OIL WELL X GAS WELL. DRY OTHER              |                             |             |             |                                     |         |                            |                    | 7.  | 7. Lease Name or Unit Agreement Name    |                         |                    |                          |  |  |
| b. Type of Completio  |                             |             |             |                                     |         |                            |                    |   | Nortl                                   | n Hobbs (               | G/SAU              | nit                      |  |  |
| NEW WELL WORK   |                             | PLUG BACK   | Di          | IFF O                               | THER _  |                            |                    |   |   |                         |                    |                          |  |  |
| 2. Name of Operator   | - DEFEN                     | DACK        | 101         |                                     | THEK _  |                            |                    | 8.  | Well No.                                |                         |                    |                          |  |  |
| Occidental Per  |                             | Partners    | nip         |                                     |         |                            |                    |   |   | 64                      | 13                 |                          |  |  |
| 3. Address of Operator  P.O. Box 4294, Houston, TX 77210~4294 |                             |             |             |                                     |         |                            |                    |   |   | 9. Pool name or Wildcat |                    |                          |  |  |
| 4. Well Location  | Houston, IX                 | 77210~4     | 494         |                                     |         |                            |                    |   | Hobbs;                                  | Grayburg                | g - Sar            | n Andres                 |  |  |
| Unit Letter   | I 2374                      | _ Feet From | The         | Sout                                | h       | Line a                     | and                | 1213  | Feet Fro                                | om The                  | Eas                | <b>st</b> Line           |  |  |
|   |                             |             |             |                                     |         |                            |                    |   |   |                         |                    |                          |  |  |
| Section<br>10. Date Spudded                                   | 29<br>11. Date T.D. Reach   | Township    | _           | 8-S<br>mpl. (Ready t                | Range   |                            |                    | NMF   | M<br>RKB, RT, G                         | Lea<br>Poto)            | 4. Elem            | County                   |  |  |
| 3/30/01   | 4/5/01                      | eu   12.    | Date Col    | 4/26/0                              |         | 13.                        | . Elevani          | 3648'   |   | K, etc.)                | 4. Elev.           | Casinghead               |  |  |
| 15. Total Depth   | 16. Plug Ba                 |             | 17          | 7. If Multiple<br>Many Zone         | Compl.  | How                        | 18. Int            | ervals<br>illed By                                | 1 Rotary Too                            | ls 10                   | Cable Too          | ols                      |  |  |
| 4411' 19. Producing Interval                                  | (s) of this completion      |             |             |                                     |         |                            | 101                |   | 4411                                    | . Was Direc             | tional Su          | ruay Mada                |  |  |
|   | ; Grayburg - S              | -           |             |                                     |         |                            |                    |   |   | n. was Direc            |                    | ivey wade                |  |  |
| 21. Type Electric and 0                                       |                             |             |             |                                     |         |                            |                    |   | 22. Was Well                            | Cored                   |                    |                          |  |  |
|   | L Micro-SFL, C              |             | DEC         | ODD (D                              | on out  | all atmi                   | <b>n</b> aa        | 4 :   | No                                      |                         |                    |                          |  |  |
| 23.<br>CASING SIZE  | WEIGHT LB.                  |             | DEPTH       | CORD (R                             |         | <u>an stri</u><br>DLE SIZE | ngs se             |   | MENTING RE                              | CORD                    | AM                 | OUNT PULLED              |  |  |
| 14  | Conduct                     | or          | 4(          | ,                                   |         | 18                         |                    |   | 50 sx.                                  |                         |                    |                          |  |  |
|   |                             |             |             | .,.,                                |         |                            |                    |   |   |                         |                    |                          |  |  |
| 8-5/8   | 24                          |             | 151         | L3                                  |         | 12-1/4                     |                    |   | 850 sx.                                 |                         |                    |                          |  |  |
|   |                             |             |             |                                     |         |                            |                    |   | <del></del>                             |                         |                    |                          |  |  |
| <b>5-1/2</b><br>24.   | 15.5                        | L<br>_LINER | A4:         |                                     |         | 7-7/8                      |                    | 25.   | 900 sx.                                 | ING REC                 | ORD                |                          |  |  |
| SIZE  | ТОР                         | BOTTO       |             | SACKS CEN                           | MENT    | SCR                        | EEN                |   | SIZE                                    | DEPTH :                 |                    | PACKER SET               |  |  |
|   |                             |             |             |                                     |         |                            |                    | 2   | 2-7/8                                   | 4006                    | ,                  |                          |  |  |
|   |                             |             |             |                                     |         |                            |                    |   |   |                         |                    |                          |  |  |
| 26. Perforation reco  | rd (interval, size, a       | nd number)  |             |                                     |         |                            | CID, S<br>TH INTER |   |   |                         |                    | EEZE, ETC.<br>ERIAL USED |  |  |
|   |                             |             |             |                                     |         |                            | · - 42             |   |   | 1. 15% H                |                    |                          |  |  |
| 4096′ - 4274′   | (4 JSPF)                    |             |             |                                     |         | ļ                          | ,                  |   |   |                         |                    |                          |  |  |
| 28.   | ·                           |             | ]           | PRODUC                              | TIO     | N                          |                    |   | <u> </u>                                |                         |                    |                          |  |  |
| Date First Production   | Product                     | ion Method  |             | g, gas lift, pur                    |         |                            | ype pum            | p)  |   | Well Statu              | s (Prod.           | or Shut-in)              |  |  |
| 4/27/01   |                             |             |             | ping, ES                            |         | •                          |                    | <del></del>                                       |   |                         | Produc             |                          |  |  |
| Date of Test<br><b>4/27/01</b>                                | Hours Tested 24             | Choke       | Size<br>I/A | Prod'n For<br>Test Period           |         | Oil - Bbl.<br><b>154</b>   | (                  | Gas - MCF<br><b>77</b>                            | Water 22:                               |                         | 1                  | Dil Ratio<br><b>DO</b>   |  |  |
| Flow Tubing Press.  | Casing Pressure             |             | ated 24-    | Oil - Bbl.                          | L       | Gas - M                    | 4CF                | Water   | - Bbl.                                  | Oil Gravit              | y - API -(         |                          |  |  |
| 29. Disposition of Gas  | 35<br>(Sold, used for fuel, |             |             | 154                                 |         | 77                         |                    | 223   | <del></del>                             | nessed By               | <u> </u>           |                          |  |  |
| Sold  | ,                           | , ,         | ,           |                                     |         |                            |                    |   |   | Whitley                 | •                  |                          |  |  |
| 30. List Attachments  |                             |             |             |                                     |         |                            |                    |   |   |                         | -                  |                          |  |  |
|   | (3 ea.), Incli              |             |             | thia farmer                         |         | J 00                       | 40 4h : 1          | 004.05  | I                                       | 4 h!! - 6               |                    |                          |  |  |
| 31. I hereby certify th                                       | at the intormation st       | iown on bot | i sides of  | uns form is t                       | rue and | а сотріеtе                 | to the b           | est of my .                                       | knowiedge an                            | u nenet                 |                    |                          |  |  |
| Signature   | UMK Stepl                   | 21M         |             | Printed Name                        | Ma      | ırk Ster                   | hens               | Tit   | <sub>le</sub> Bus. A                    | nalyst (                | SG) <sub>Dat</sub> | e_5/18/01                |  |  |
|   |                             |             |             |                                     |         |                            |                    |   |   |                         |                    |                          |  |  |

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division 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 25 through 29 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 Northeastern New Mexico

| Anhy  |              |                                       | T. Canyon  | T. Ojo A    | Alamo —              | ام سما                                       | T. Penn. "B"          |
|---|--------------|---------------------------------------|--|-------------|----------------------|--|-----------------------|
|   |              |                                       |  | T Dieter    | mu-Fruit             | iand   | I. Penn. "C"          |
|   |              |                                       |  | T. CUCC     | ieu Ciiiis           | ·——  | 1. Penn. D            |
| 7 Dive  | arc          |                                       | <b>49</b> T. Miss ——————————————————————————————————   | T. Chiri    | House-               |  | T. Leadville          |
|   | 1            |                                       | 86 T. Silurian   | T. Doint    | ree                  |  | 1. Madison            |
|   |              | 37                                    | 1. Dilulian —  | T. Mone     | Lookout              |  | 1. Elbert             |
|   |              | 40                                    |  |             |                      |  |                       |
|   |              |                                       |  | 1. Gailu    | .р <u></u>           |  | T. Ignacio Otzte      |
| Paddo   | ock          |                                       | T. McKee   | Base Gr     | eenhorn.             |  | T. Granite            |
| . 1 addo                                      |              | · · · · · · · · · · · · · · · · · · · | T. Ellenburger   | T. Dako     | ta                   |  | T                     |
| . Biinet                                      | огу          |                                       | T. Gr. Wash  |             | ison                 |  | T                     |
|   |              |                                       |  |             | to                   |  | T                     |
| . Drink:                                      | ard          |                                       | T. Bone Springs  | T. Entra    | da                   |  | T                     |
| . Abo =                                       |              | <del></del>                           | T  | T. Wing     | ate                  |  | T                     |
| . Wolfe                                       | amp          |                                       | T  | T. Chinl    | .e                   |  | Т                     |
| .Penn _                                       |              |                                       | T  | T. Perm     | ain                  |  | T.                    |
| Cisco   | (Bough C     |                                       | T  | T. Penn     | "A"                  |  | T                     |
|   |              |                                       | OIL OR GAS SAN   | NDS OR 2    | ONES                 |  |                       |
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|   |              |                                       | to   | ,           |                      |  | to                    |
| ,   |              |                                       | IMPORTANT W  |             |                      |  |                       |
| clude d                                       | data on rai  | te of water                           | nflow and elevation to which water ro  | AICH SA     | MD2                  |  |                       |
| iciude (                                      | aata On Ta   | ie di water i                         | intow and elevation to which water to  | se in noie. |                      | <b>.</b>                                     |                       |
| $\alpha$ 1 fr/                                |              |                                       |  |             |                      | teet .                                       |                       |
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| o. 2, fro<br>o. 3, fro<br>From<br>6449        | To 3753      | Thickness in Feet 1104 163            | Lithology  Lithology  Mixed anhydrite & silt with minor dolumite  Mixed anhydrite, dolumite & silt   | Attach a    | ddition              | feet<br>feet<br>al sheet if                  | `necessary)           |
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