

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE

Form approved 80-003 00517
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____

2. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. CENVR. ☐ Other _____

3. NAME OF OPERATOR
Siete Oil and Gas Corporation

4. ADDRESS OF OPERATOR
P.O. Box 2523 Roswell, NM 88202-2523

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 330' FNL & 990' FWL, NW $\frac{1}{4}$ NW $\frac{1}{4}$, Unit Letter D
At top prod. interval reported below
At total depth Same

14. PERMIT NO. 30-025-30314 DATE ISSUED _____

15. DATE SPUDDED 9/26/88 16. DATE T.D. REACHED 10/20/88 17. DATE COMPL. (Ready to prod.) N/A 18. ELEVATIONS (OF, BKK, RT, OR, ETC.)* 3761' GR 19. BLEV. CASINGHEAD 3776' KB

20. TOTAL DEPTH, MD & TVD 9200' 21. PLUG BACK T.D., MD & TVD N/A 22. IF MULTIPLE COMPL., HOW MANY? N/A 23. INTERVAL UNMILLED BY _____ ROTARY TOOLS X CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
N/A 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN
DLL/MSFL & CNL/LDT 27. WAS WELL CORRED No

6. LEASE DESIGNATION AND SERIAL NO.
NM-9016

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Inca Federal

9. WELL NO.
9

10. FIELD AND POOL, OR WILDCAT
Young North Bone Spring

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
Sec. 17: T18S, R32E

12. COUNTY OR PARISH
Lea 13. STATE
NM

CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8"	54.5#	498'	17 1/7"	460 sxs circ	
8 5/8"	24#	2410'	12 1/4"	800 sxs circ	

LINER RECORD					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)
N/A

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
DEPTH INTERVAL (MD) _____ AMOUNT AND KIND OF MATERIAL USED N/A

33. PRODUCTION

DATE FIRST PRODUCTION N/A PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) N/A WELL STATUS (Producing or shut-in) N/A

DATE OF TEST N/A	HOURS TESTED N/A	CHOKE SIZE N
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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	TOP	
						MEAS. DEPTH	TRUE VERT. DEPTH
					Queen Brushy Canyon Bone Spring Wolfcamp	3770' 5500' 6330' 9682'	- 9' -1739' -2569' -5921'