

COPY TO O. C. A.
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN DUPLICATE
(See instructions on reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESTR. ☐ Other ☐

2. NAME OF OPERATOR

Walter W. Krug DBA Wallen Production Company

3. ADDRESS OF OPERATOR

Box 1960, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface 990 FWL & 330 FNL

At top prod. interval reported below

At total depth same

14. PERMIT NO. **U. S. GEOLOGICAL SURVEY**
HOBBS, NEW MEXICO DATE ISSUED
MAY 11 1979

15. DATE SPUDDED 3/3/79

16. DATE T.D. REACHED 4/24/79

17. DATE COMPL. (Ready to prod.) 5/8/79

20. TOTAL DEPTH, MD & TVD 3765'

21. PLUG, BACK T.D., MD & TVD 3748'

22. IF MULTIPLE COMPL., HOW MANY? *****

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
3510' - 3748' Yates Sand26. TYPE ELECTRIC AND OTHER LOGS RUN
GRN & CCL

CASING RECORD (Report all strings set in well)		HOLE SIZE	
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	
13 3/8"	72	254'	15"
10 3/4"	48	691'	12 1/2"
8 5/8"	32	1185'	10"
7"	23	3480'	8"

LINER RECORD		SACKS CEMENT*	
SIZE	TOP (MD)	BOTTOM (MD)	
4 1/2"	3235'	3748'	60

31. PERFORATION RECORD (Interval, size and number)
3733' -36', 0.51", 1232. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
DEPTH INTERVAL (MD) 3733-36' AMOUNT AND KIND OF MATERIAL USED 10,000 #20/4033.* PRODUCTION
DATE FIRST PRODUCTION 5/9/79 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) swabbing WELL STATUS (Producing or shut-in) ☒ PDATE OF TEST 5/9/79 HOURS TESTED 24 CHOKE SIZE ***** PROD'N. FOR TEST PERIOD ☒ OIL—BBL. 68 GAS—MCF. TSTM WATER—BBL. TSTM GAS-OIL 1 TST

FLOW, TUBING PRESS. 200 CALCULATED 24-HOUR RATE 68 GAS—MCF. TSTM WATER—BBL. TSTM OIL GRAVITY-A 34.5 TEST WITNESSED BY Walter W. Krug

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
used for fuel35. LIST OF ATTACHMENTS
GRN36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED Walter W. Krug TITLE Engineer DATE 5/9/79

*(See Instructions and Spaces for Additional Data on Reverse Side)

5. LEASE DESIGNATION AND NUMBER NM 08822
6. IF INDIAN, ALLOTTEE OR TRIBE NAME *****
7. UNIT AGREEMENT NAME *****
8. FARM OR LEASE NAME Wallen Kinney
9. WELL NO. # 1
10. FIELD AND POOL, OR WILDCAT Lynch Yates
11. SEC., T., R., M., OR BLOCK AND SURVEY Sec 34, T 20 S, R 34
12. COUNTY OR PARISH Lea
13. STATE New Mexico
19. ELEV. CASINGHEAD 3726'
23. INTERVALS DRILLED BY GR 3725'
25. WAS DIRECTIONAL SURVEY MADE X
27. WAS WELL CORED No

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
Alluvium	210'	250'	Water	Rustler	1620'	
Santa Rosa Sand	940' 1015'	945' 1035'	Water	Top Salt	1755'	
Yates Sand	3730'	3748'	Oil	Bottom Salt	3320'	
Seven Rivers Reef	3748'	3761'	Water	Top Lime	3355'	
				Top Yates	3400'	
				Top Seven Rivers	3748'	