

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-105  
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 1980, Hobbs, NM 88240

P.O. Box 2088

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

|                                      |                                                                        |
|--------------------------------------|------------------------------------------------------------------------|
| WELL API NO.                         | 30 025 33306                                                           |
| 5. Indicate Type of Lease            | STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil / Gas Lea               |                                                                        |
| 7. Lease Name or Unit Agreement Name | PHILLIPS, J. R.                                                        |
| 8. Well No.                          | 13                                                                     |
| 9. Pool Name or Wildcat              | MONUMENT BLINEBRY                                                      |

|                                                                                                                                                                                                                      |                             |                                              |                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------------|-----------------------------------------------------|
| WELL COMPLETION OR RECOMPLETION REPORT AND LOG                                                                                                                                                                       |                             |                                              |                                                     |
| 1a. Type of Well:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER                                                                               |                             |                                              |                                                     |
| h. Type of Completion:<br>NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> DIFF RES. <input type="checkbox"/> OTHER |                             |                                              |                                                     |
| 2. Name of Operator<br>TEXACO EXPLORATION & PRODUCTION INC.                                                                                                                                                          |                             | 3. Well No. 13                               |                                                     |
| 3. Address of Operator<br>205 E. Bender, HOBBS, NM 88240                                                                                                                                                             |                             | 9. Pool Name or Wildcat<br>MONUMENT BLINEBRY |                                                     |
| 4. Well Location<br>SUR Unit Letter E 1700 Feet From The NORTH Line and 940 Feet From The WEST Line<br>BHL Section 6 Township 20S Range 37E 350 NMPM LEA COUNTY                                                      |                             |                                              |                                                     |
| 10. Date Spudded<br>12/16/97                                                                                                                                                                                         | 11. Date T.D. Reached       | 12. Date Compl. (Ready to Prod.)<br>12/31/97 | 13. Elevations (DF & RKB, RT, GR, etc.)<br>3567' GL |
| 14. Eicv. Csghead                                                                                                                                                                                                    |                             |                                              |                                                     |
| 15. Total Depth<br>6985'                                                                                                                                                                                             | 16. Plug Back T.D.<br>6985' | 17. If Mult. Compl. How Many Zones?          | 18. Intervals Rotary Tools<br>Drilled By            |
| 19. Producing Interval(s), of this completion - Top, Bottom, Name<br>6202-6985 (HORIZONTAL) BLINEBRY                                                                                                                 |                             |                                              | 20. Was Directional Survey Made<br>NO               |
| 21. Type Electric and Other Logs Run                                                                                                                                                                                 |                             |                                              | 22. Was Well Cored<br>No                            |

|                                                                   |                |            |                                                 |               |               |
|-------------------------------------------------------------------|----------------|------------|-------------------------------------------------|---------------|---------------|
| 23. CASING RECORD (Report all Strings set in well)                |                |            |                                                 |               |               |
| CASING SIZE                                                       | WEIGHT LB./FT. | DEPTH SET  | HOLE SIZE                                       | CEMENT RECORD | AMOUNT PULLED |
| 8-5/8"                                                            | 24#            | 1150'      | 11"                                             | 500 SX, CIRC  |               |
| 5-1/2"                                                            | 17#, 15.5#     | 6000'      | 7-7/8"                                          | 3015 SX       |               |
| 24. LINER RECORD                                                  |                |            |                                                 |               |               |
| SIZE                                                              | TOP            | BOTTOM     | SACKS CEMENT                                    | SCREEN        |               |
| 25. TUBING RECORD                                                 |                |            |                                                 |               |               |
| SIZE                                                              | DEPTH SET      | PACKER SET |                                                 |               |               |
| 2-7/8                                                             | 5316'          | 6202'      |                                                 |               |               |
| 26. Perforation record (interval, size, and number)<br>6202-6985' |                |            | 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. |               |               |
|                                                                   |                |            | DEPTH INTERVAL                                  |               |               |
|                                                                   |                |            | AMOUNT AND KIND MATERIAL USED                   |               |               |
|                                                                   |                |            | 6202-6985'                                      |               |               |
|                                                                   |                |            | 70,000 GALS 15%NEFE                             |               |               |

|                                                                                                                                   |                    |                                                                                                    |                        |                             |                 |                                             |                         |
|-----------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------|------------------------|-----------------------------|-----------------|---------------------------------------------|-------------------------|
| 28. PRODUCTION                                                                                                                    |                    |                                                                                                    |                        |                             |                 |                                             |                         |
| Date First Production<br>1/6/98                                                                                                   |                    | Production Method (Flowing, gas lift, pumping - size and type pump)<br>PUMPING (2-1/2"X1-1/2"X24') |                        |                             |                 | Well Status (Prod. or Shut-in)<br>PRODUCING |                         |
| Date of Test<br>6-24-98                                                                                                           | Hours tested<br>24 | Choke Size                                                                                         | Prod'n For Test Period | Oil - Bbl.<br>16            | Gas - MCF<br>17 | Water - Bbl.<br>6                           | Gas - Oil Ratio<br>1062 |
| Flow Tubing Press.                                                                                                                | Casing Pressure    | Calculated 24-Hour Rate                                                                            | Oil - Bbl.             | Gas - MCF                   | Water - Bbl.    | Oil Gravity - API -(Corr.)<br>37.5@60       |                         |
| 29. Disposition of Gas (Sold, used for fuel, vented, etc.)<br>SOLD                                                                |                    |                                                                                                    |                        |                             |                 | Test Witnessed By                           |                         |
| 30. List Attachment                                                                                                               |                    |                                                                                                    |                        |                             |                 |                                             |                         |
| 31. I hereby certify that the information on both sides of this form is true and complete to the best of my knowledge and belief. |                    |                                                                                                    |                        |                             |                 |                                             |                         |
| SIGNATURE J. Denise Leake                                                                                                         |                    |                                                                                                    |                        | TITLE Engineering Assistant |                 | DATE 7/6/98                                 |                         |
| TYPE OR PRINT NAME J. Denise Leake                                                                                                |                    |                                                                                                    |                        | Telephone No.               |                 | 397-0405                                    |                         |