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

Signature

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-105 Revised 1-1-89

Title Technical Assistant Date 7/10/92

WELL API NO. OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM \$8240 30-025-26659 P.O. Box 2088 5. Indicate Type of Lease DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 STATE X FEE 6. State Oil & Gas Lease No. DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 WELL COMPLETION OR RECOMPLETION REPORT AND LOG la Type of Well: 7. Lease Name or Unit Agreement Name OIL WELL GAS WELL DRY OTHER Injector b. Type of Completion: Arrowhead Grayburg Unit MET \mathbf{X} OVER DEEPEN RESVR OTHER 2. Name of Operator 8. Well No. Chevron U.S.A., Inc. 205 3. Address of Operator 9. Pool name or Wildow P.O. Box 1150 Midland, TX 79702 Arrowhead Grayburg 4. Well Location Unit Letter K : 1980 Feet From The South Line and 2210 Feet From The West Line Township 22S Range 36E **NMPM** Lea County 10. Date Spudded 12. Date Compi. (Ready to Prod.) 11. Date T.D. Reached 13. Elevations (DF& RKB, RT, GR, etc.) 14. Elev. Casinghead 7/21/92 3475' GE 17. If Multiple Compl. How Many Zones? 15. Total Depth 16. Plug Back T.D. 18. Intervals Drilled By Rotary Tools Cable Tools 6804' 4050' 19. Producing interval(s), of this completion - Top, Bottom, Name 20. Was Directional Survey Made 3710'-3906' Grayburg No 21. Type Electric and Other Logs Run 22. Was Well Cored None 23. CASING RECORD (Report all strings set in well) **CASING SIZE** WEIGHT LB/FT. DEPTH SET HOLE SIZE **CEMENTING RECORD** AMOUNT PULLED No New Casing Se 24. LINER RECORD **TUBING RECORD** SIZE TOP BOTTOM SACKS CEMENT SCREEN SIZE **DEPTH SET** PACKER SET 2-3/8" 3658' 3664' 26. Perforation record (interval, size, and number) 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. 3710'-3906' 4" 120 deg (192 holes) DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED 3710'-3896' <u>1000 gals 15% NEFE</u> **PRODUCTION Date First Production** Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in) Date of Test Hours Tested Oil - Bbl. Choke Size Prod's For Gas - MCF Water - Bbl. Gas - Oil Ratio Test Period Calculated 24-Hour Rate Flow Tubing Press. Casing Pressure Oil - Bbl. Gas - MCF Water - BbL Oil Gravity - API - (Corr.) 29. Disposition of Gas (Sold, used for fuel, vented, etc.) Test Witnessed By 30. List Attachments 31. 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

Printed

Name J. K. Ripley