

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

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reverse e)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. Las Cruces 065525	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR QUANAH PETROLEUM, INC.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 4835 LBJ Freeway, Suite 525, Dallas, Texas 75234		8. FARM OR LEASE NAME Elliott Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FNL 660' FEL SE1/4 NE1/4 Section 8-21S-38E At top prod. interval reported below same as above At total depth same as above		9. WELL NO. No. 1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT WANIZ-ABO	
DATE ISSUED		11. SEC. T. R., M., OR BLOCK AND SURVEY OR AREA Section 8-21S-38E	
15. DATE SPUDDED 8-15-80		12. COUNTY OR PARISH Lea	
16. DATE T.D. REACHED 9-9-80		13. STATE New Mexico	
17. DATE COMPL. (Ready to prod.) 10-10-80		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* RT-GL = 12' GL=3562	
19. ELEV. CASINGHEAD RT-CH = 11.5		20. TOTAL DEPTH, MD & TVD 7600	
21. PLUG, BACK T.D., MD & TVD 7547		22. IF MULTIPLE COMPL., HOW MANY* Single	
23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7305 - 7497 ABO	
25. CASING RECORD (Report all strings set in well)		26. TYPE ELECTRIC AND OTHER LOGS RUN FORXO-Guard/CNL/Gamma-Collar Perforation Record	
27. WAS WELL CORDED No		28. WAS DIRECTIONAL SURVEY MADE Yes	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33.* PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Venting	
35. LIST OF ATTACHMENTS Directional Survey, DST Results		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
SIGNED <u>W. P. Oliver</u>		TITLE <u>L.P. OPERATIONS</u>	
DATE <u>1-20-81</u>			

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

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:				38. GEOLOGIC MARKERS	
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					
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH
					TRUE VERT. DEPTH
Anhydrite	1616	1695		Anhy	1616
Salt	1695	2770		Salt	1695
Yates	2911	3020		Yates	2911
San Andres	4300	5617		San Andres	4300
Glorieta	5617	6605		Glorieta	5617
Tubb	6605	6713		Tubb	6605
Abo	7152	UNK		Abo	7152