Submit To Appropriate District Office Form C-105 State of New Mexico State Lexae - 6 copies Revised March 25, 1999 Fcc Lease - 5 conies Energy, Minerals and Natural Resources District 1 WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 30-25-06342 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 88210 5. Indicate Type of Lease District III 2040 South Pacheco STATE D FEE D 1000 Rio Brazos Rd., Azicc, NM 87410 State Oil & Gas Lease No. B116131NM District IV Santa Fe, NM 87505 2040 South Pachoco, Santa Fc, NM 87505 WELL COMPLETION OR RECOMPLETION REPORT AND LOG la. Type of Well: 7. Lease Name or Unit Agreement Name OIL WELL X GAS WELL DRY OTHER State b. Type of Completion: WELL WELL WORK DEEPEN PLUG X RESVR. OTHER 2. Name of Operator 8. Well No. Chuza Operating 3. Address of Operator 9. Pool name or Wildcat Hare; San Andres East c/o Box 953, Midland, TX 79702 4. Well Location 2970 Foot From The South 990 Unit Letter West Feet From The 215 37E Lea Section Township NMPM County 10. Date Spudded 11. Date T.D. Reached 12. Date Compl. (Ready to Prod.) 13. Elevations (DF& RKB, RT, GR, etc.) 14. Elcv. Casinghead 3493' DF 15. Total Depth 16. Plug Back T.D. 17. If Multiple Compl. How Many 18. Intervals Rotary Tools Cable Tools Drilled By Zones? 5715 19. Producing Interval(s), of this completion - Top, Bottom, Name 20. Was Directional Survey Made 3975-4091 Nο 21. Type Electric and Other Logs Run 22. Was Well Cored GR CASING RECORD (Report all strings set in well) CASING SIZE CEMENTING RECORD WEIGHT LB /FT. HOLE SIZE AMOUNT PULLED 8 5/8" 5 1/2" on file 24. LINER RECORD JUBING RECORD LL 25 3/8" S 3910 DCD PACKER SET SIZE BOTTOM SACKS CEMENT | SCREEN SIZE 3910 DCD 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC 26. Perforation record (interval, size, and number) 3975-80', 4024-2b', 4037-40', 4089-91'. AMOUNT AND KEND WATER A LEED 1000 gals 15% HCL Acid. DEPTH INTERVAL 3975-4091 CIBP @ 5250' w/ 30 cmt on top; squeeze 35,000 # 20/40 sand and casing @ 4150' w/ 4 holes & 600 sxs Cl C. 22,000 gals frac fluid **PRODUCTION** Date First Production Well Status (Prod. or Shut-in) Production Method (Flowing, gas lift, pumping - Size and type pump) 1-10-02 Producing Pumping Date of Test Hours Tested Choke Size Prod'n For Oil - Bhl Gas - MCF Water - Bbl. Gas - Oil Batio Test Period 65 1375 8 11 1 - 12 - 0224 Gas - MCF Flow Tubing Casing Préssure Calculated 24-Oil - Bbl Water - Bbl. Oil Gravity - API - (Cork) Hour Rate 29. Disposition of Gas (Sold, used for fuel, vented, etc.) Test Witnessed By Sales 30. List Attachments C - 10431 I hereby certify that the information shown asstrue and complete to the best of my knowledge and belief in both sides of this for 5-17-02

Mil Vitche

Name Ann E. Ritchie Title Regulatory Agent



Date 3-12-02

District I PO Box 1988, Hobbs, NM 88241-1988 District II PO Drawer DD, Artesia, NM 88211-8719 District III 1008 Rio Brazos Rd., Astoc, NM 87418 District IV

PO Bax 2008, Santa Fe, NM 87564-2008

State of New Mexico Energy, Macrah & Natural Resources Department

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088 Form C-102 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office

State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

| 30 025 06342 96601 Hare; San Andres, Eas 'Property Code 16985 State 'OGRID No. 004452 Chuza Operating **Surface Location** | t | Well Number |
|---|-------------|---------------|
| 16985 State 'OCRID No. 'Operator Name 004452 Chuza Operating **Surface Location** | | 4 Elevation |
| 004452 Chuza Operating **Surface Location** | | |
| | | 3494' DF |
| | · | |
| M 2 21S 37E Let Ids Feet from the North/Seeth Ease Feet from the 2970' South 990' | West | Ceeaty Lea |
| 11 Bottom Hole Location If Different From Surface | <u> </u> | |
| UL or lot no. Section Township Range Lot Ida Fost from the North/South line Fost from the | East/West & | e County |

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

| 16 | | | 17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my browledge and belief |
|----------|---|--|--|
| ,0/82 | | | Superiore 5-17-12 |
| / 990' / | | | Regulatory Agent 2-5-018 915 684-6381 |
| · 40 ac | | | Date 18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by |
| 8 | | | me or under my supervision, and that the same is true and correct to the best of my belief. Date of Survey |
| d | | | Signature and Scal of Professional Surveyor: |
| | į | | Certificate Number |