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Form C-105  
Revised 11-1-78

# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

|                                |                                         |
|--------------------------------|-----------------------------------------|
| 5a. Indicate Type of Lease     |                                         |
| State <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 5. State Oil & Gas Lease No.   |                                         |
|                                |                                         |

|                                                                                                                 |                                                                                                                               |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| A. TYPE OF WELL                                                                                                 |                                                                                                                               |
| OIL WELL <input checked="" type="checkbox"/>                                                                    | GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>                                 |
| B. TYPE OF COMPLETION                                                                                           |                                                                                                                               |
| NEW WELL <input type="checkbox"/> WORK OVER <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> | PLUG BACK <input checked="" type="checkbox"/> DIFF. RESVR. <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> |

|                                                  |
|--------------------------------------------------|
| 7. Unit Agreement Name                           |
| 8. Farm or Lease Name<br>Vivian                  |
| 9. Well No.<br>8                                 |
| 10. Field and Pool, or Wildcat<br>Brunson S. Abo |
|                                                  |

|                                                        |  |
|--------------------------------------------------------|--|
| 1. Name of Operator<br>Chevron U.S.A. Inc.             |  |
| 2. Address of Operator<br>P.O. Box 670 Hobbs, NM 88240 |  |
| 3. Location of Well                                    |  |

|                      |                        |                            |                     |                |
|----------------------|------------------------|----------------------------|---------------------|----------------|
| UNIT LETTER <u>D</u> | LOCATED <u>510</u>     | FEET FROM THE <u>North</u> | LINE AND <u>430</u> | FEET FROM      |
| THE <u>West</u>      | LINE OF SEC. <u>30</u> | TWP. <u>22S</u>            | RGE. <u>38E</u>     | SECT. <u>1</u> |

|                   |
|-------------------|
| 12. County<br>Lea |
|-------------------|

|                             |                                 |                                            |                                                    |                      |
|-----------------------------|---------------------------------|--------------------------------------------|----------------------------------------------------|----------------------|
| 15. Date Spudded<br>5/16/74 | 16. Date T.D. Reached<br>6/9/74 | 17. Date Compl. (Ready to Prod.)<br>1/4/87 | 18. Elevations (DF, RKB, RT, GR, etc.)<br>3320' GL | 19. Elev. Casinghead |
| 20. Total Depth<br>7324     | 21. Plug Back T.D.<br>7017      | 22. If Multiple Compl., How Many<br>2      | 23. Intervals Drilled By<br>Rotary Tools<br>0-7324 | Cable Tools          |

|                                                                                                 |                                 |
|-------------------------------------------------------------------------------------------------|---------------------------------|
| 24. Producing Intervals, of this completion - Top, Bottom, Name<br>6469' - 6914' Brunson S. Abo | 25. Was Directional Survey Made |
|-------------------------------------------------------------------------------------------------|---------------------------------|

|                                      |                    |
|--------------------------------------|--------------------|
| 26. Type Electric and Other Logs Run | 27. Was Well Cored |
|--------------------------------------|--------------------|

| CASING RECORD (Report all strings set in well) |                |           |           |                  |               |
|------------------------------------------------|----------------|-----------|-----------|------------------|---------------|
| CASING SIZE                                    | WEIGHT LB. FT. | DEPTH SET | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
| No New Casing                                  |                |           |           |                  |               |
|                                                |                |           |           |                  |               |
|                                                |                |           |           |                  |               |

| LINER RECORD |     |        |              | TUBING RECORD |       |           |            |
|--------------|-----|--------|--------------|---------------|-------|-----------|------------|
| SIZE         | TOP | BOTTOM | SACKS CEMENT | SCREEN        | SIZE  | DEPTH SET | PACKER SET |
|              |     |        |              |               | 2 3/8 | 6913      | 6157       |
|              |     |        |              |               |       |           |            |

|                                                                               |                                                |                                       |
|-------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------|
| 28. Perforation Details (Interval, size and number)<br>6469 - 6914 (36 holes) | 29. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. |                                       |
|                                                                               | DEPTH INTERVAL                                 | AMOUNT AND KIND MATERIAL USED         |
|                                                                               | 6469-6914                                      | 5750 Gallons 15% NEFE HCL             |
|                                                                               | 6469-6914                                      | 2554 bbls Gelled 15% NEFE HCL & water |

| PRODUCTION                          |                      |                                                                                    |                              |                  |                   |                                             |                            |
|-------------------------------------|----------------------|------------------------------------------------------------------------------------|------------------------------|------------------|-------------------|---------------------------------------------|----------------------------|
| 30. Date First Production<br>1/4/87 |                      | 31. Production Method (Flowing, gas lift, pumping - Size and type pump)<br>Flowing |                              |                  |                   | 32. Well Status (Prod. or Shut-in)<br>PROD. |                            |
| Date of Test<br>1-28-87             | Hours Tested<br>34   | Choke Size<br>20/64                                                                | Pressure, Test Interval<br>→ | Oil - Bbl.<br>2  | Gas - MCF<br>945  | Water - Bbl.<br>1                           | Gas - Oil Ratio<br>472.500 |
| Flow Tubing Pressure<br>310#        | Casing Pressure<br>0 | Calculated 24-Hour Rate<br>→                                                       | Oil - Bbl.<br>2              | Gas - MCF<br>945 | Water - Bbl.<br>1 | Oil Gravity - API (Corr.)<br>37.8           |                            |

|                                                            |                   |
|------------------------------------------------------------|-------------------|
| 34. Disposition of Gas (Sold, used for fuel, vented, etc.) | Test Witnessed By |
|------------------------------------------------------------|-------------------|

|                                                                                                                                         |                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| 35. List of Attachments                                                                                                                 |                                               |
| 36. 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. |                                               |
| SIGNED <u>C. Mann</u>                                                                                                                   | TITLE <u>NM Area Supt.</u> DATE <u>2-9-87</u> |

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

### Southeastern New Mexico

|                          |                        |
|--------------------------|------------------------|
| T. Anhy _____            | T. Canyon _____        |
| T. Salt _____            | T. Strawn _____        |
| B. Salt _____            | T. Atoka _____         |
| T. Yates _____           | T. Miss _____          |
| T. 7 Rivers _____        | T. Devonian _____      |
| T. Queen _____           | T. Silurian _____      |
| T. Grayburg _____        | T. Montoya _____       |
| T. San Andres _____      | T. Simpson _____       |
| T. Glorieta _____        | T. McKee _____         |
| T. Paddock _____         | T. Ellenburger _____   |
| T. Blinberry _____       | T. Gr. Wash _____      |
| T. Tubb _____            | T. Granite _____       |
| T. Drinkard _____        | T. Delaware Sand _____ |
| T. Abe _____             | T. Bone Springs _____  |
| T. Wolfcamp _____        | T. _____               |
| T. Penn. _____           | T. _____               |
| T. Cisco (Bough C) _____ | T. _____               |

### Northwestern New Mexico

|                             |                         |
|-----------------------------|-------------------------|
| T. Ojo Alamo _____          | T. Penn. "B" _____      |
| T. Kirtland-Fruitland _____ | T. Penn. "C" _____      |
| T. Pictured Cliffs _____    | T. Penn. "D" _____      |
| T. Cliff House _____        | T. Leadville _____      |
| T. Menefee _____            | T. Madison _____        |
| T. Point Lookout _____      | T. Elbert _____         |
| T. Mancos _____             | T. McCracken _____      |
| T. Gallup _____             | T. Ignacio Qtzite _____ |
| T. Base Greenhorn _____     | T. Granite _____        |
| T. Dakota _____             | T. _____                |
| T. Morrison _____           | T. _____                |
| T. Todilto _____            | T. _____                |
| T. Entrada _____            | T. _____                |
| T. Wingate _____            | T. _____                |
| T. Chinle _____             | T. _____                |
| T. Permian _____            | T. _____                |
| T. Penn. "A" _____          | T. _____                |

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from.....to.....feet.....

No. 4, from.....to.....feet.....

| From | To | Thickness<br>in Feet | Formation | From | To | Thickness<br>in Feet | Formation |
|------|----|----------------------|-----------|------|----|----------------------|-----------|
|      |    |                      |           |      |    |                      |           |

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