

COPY TO O.C.C.
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
(See other instructions on reverse side)Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC 030187

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

LaMunyon "A" Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Langlie Mattix

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec 22-T23S-R37E

12. COUNTY OR PARISH

Lea

13. STATE

NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Otherb. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other Returned to Production

2. NAME OF OPERATOR

Gulf Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 670, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660' FNL & 1980' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE ~~STARTED~~

9-10-80

16. DATE T.D. REACHED

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17. DATE COMPL. (Ready to prod.)

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18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3304' GL

19. ELEV. CASINGHEAD

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20. TOTAL DEPTH, MD & TVD

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21. PLUG, BACK T.D., MD & TVD

--

22. IF MULTIPLE COMPL., HOW MANY*

--

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

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24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

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25. WAS DIRECTIONAL SURVEY MADE

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26. TYPE ELECTRIC AND OTHER LOGS RUN

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27. WAS WELL CORED

--

28. CASING RECORD (Report all strings set in well)

| CASING SIZE | WEIGHT, LB./FT. | DEPTH SET (MD) | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
|-------------|-----------------|----------------|-----------|------------------|---------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

29. LINER RECORD

| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) |
|------|----------|-------------|---------------|-------------|------|----------------|-----------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

| DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED |
|---------------------|----------------------------------|
| | |
| | |
| | |
| | |

33.* PRODUCTION

| DATE FIRST PRODUCTION | | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) | | | | | WELL STATUS (Producing or shut-in) | |
|-----------------------|-----------------|--|-------------------------|----------|------------|-------------------------|------------------------------------|--|
| -- | | Pumping | | | | | Producing | |
| DATE OF TEST | HOURS TESTED | CHOKE SIZE | PROD'N. FOR TEST PERIOD | OIL—BBL. | GAS—MCF. | WATER—BBL. | GAS-OIL RATIO | |
| 9-11-80 | 24 | 2" WO | → | 5 | 5 | 3 | 1000 | |
| FLOW. TUBING PRESS. | CASING PRESSURE | CALCULATED 24-HOUR RATE | OIL—BBL. | GAS—MCF. | WATER—BBL. | OIL GRAVITY-API (CORR.) | | |
| 30# | 0# | → | 5 | 5 | 3 | 31.2° | | |

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

Area Engineer

DATE

10-6-80

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