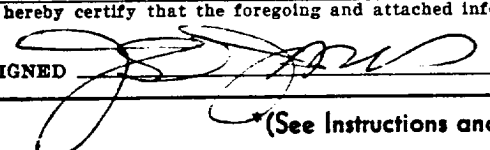


UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other
instruction
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____				5. LEASE DESIGNATION AND SERIAL NO. LC 054453																																					
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME																																					
2. NAME OF OPERATOR Atlantic Richfield Company				7. UNIT AGREEMENT NAME																																					
3. ADDRESS OF OPERATOR P. O. Box 1710, Hobbs, New Mexico 88240				8. FARM OR LEASE NAME Duthie Andrews Com WN																																					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FNL & 1980' FEL (Unit letter B) At top prod. interval reported below At total depth as above				9. WELL NO. 4																																					
14. PERMIT NO.				10. FIELD AND POOL, OR WILDCAT Langlie Mattix 7R Queen																																					
DATE ISSUED				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 19-23S-37E																																					
15. DATE SPUDDED 8/3/75		16. DATE T.D. REACHED 8/9/75		12. COUNTY OR PARISH Lea																																					
17. DATE COMPL. (Ready to prod.) 11/17/75		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3327.6' GR		13. STATE N.M.																																					
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 3700'		21. PLUG, BACK T.D., MD & TVD 3673'																																					
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY →		ROTARY TOOLS 0-3700'																																					
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3463-3606' 7Rivers Queen		25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Neutron Density log, Dual Laterolog w/RXO & Gamma Ray Correlation log																																					
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)																																							
<table border="1" style="width:100%"><tr><th>CASING SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>CEMENTING RECORD</th><th>AMOUNT PULLED</th></tr><tr><td>8-5/8" OD</td><td>24#</td><td>418'</td><td>12 1/4"</td><td>120 sx circ to surf</td><td></td></tr><tr><td>4-1/2" OD</td><td>9.5#</td><td>3700'</td><td>7-1/8"</td><td>350 sx</td><td></td></tr></table>		CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	8-5/8" OD	24#	418'	12 1/4"	120 sx circ to surf		4-1/2" OD	9.5#	3700'	7-1/8"	350 sx		<table border="1" style="width:100%"><tr><th>SIZE</th><th>TOP (MD)</th><th>BOTTOM (MD)</th><th>SACKS CEMENT*</th><th>SCREEN (MD)</th><th>SIZE</th><th>DEPTH SET (MD)</th><th>PACKER SET (MD)</th></tr><tr><td></td><td></td><td></td><td></td><td></td><td>2-3/8" OD</td><td>3567'</td><td>3404'</td></tr></table>				SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)						2-3/8" OD	3567'	3404'		
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32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		<table border="1" style="width:100%"><tr><th>DEPTH INTERVAL (MD)</th><th>AMOUNT AND KIND OF MATERIAL USED</th></tr><tr><td>2895-3035'</td><td>1500 gals 7 1/2% HCL cont'g additives</td></tr><tr><td>2895-3035'</td><td>2500 gals 12% HCL & 6% Hydrofluoric</td></tr><tr><td></td><td>MAW w/additives</td></tr><tr><td></td><td>(cont'd on attached Page #2)</td></tr></table>				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	2895-3035'	1500 gals 7 1/2% HCL cont'g additives	2895-3035'	2500 gals 12% HCL & 6% Hydrofluoric		MAW w/additives		(cont'd on attached Page #2)																										
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold - waiting on pipeline connection		TEST WITNESSED BY J. W. Guy																																							
35. LIST OF ATTACHMENTS Logs as listed in Item 26 above & Inclination Report																																									
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																																									
SIGNED 		TITLE Dist Drlg. Supv..		DATE 1/9/76																																					

(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: 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					38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
				Rustler	1172'	
				T. Salt	1270'	
				B. Salt	2167'	
				Yates	2756'	
				Queen	3433'	

Form 9-330

Duthie Andrews Com WN #4

January 9, 1976

Page 2

Item #32. Acid, Shot, Fracture, cement squeeze, Etc.

<u>Depth Interval</u>	<u>Amount & Kind Material Used</u>
2895-3035'	2000 gals 3% HCL cont'g additives
2895-3035'	20,000 gals slick FW cont'g 40#/1000 gal gel w/1 gal/1000 gal surfactant, 10 gal/1000 gal clay stabilizer cont'g 3% HCL & 40,000# 20/40 frac sd.
2895-3035'	Squeezed w/100 sx Cl H cmt cont'g .6% Halad 9 followed by 50 sx Cl C cont'g 8#/sk sd.
1260' (4 - $\frac{1}{2}$ " holes)	Squeezed behind 4 $\frac{1}{2}$ " csg & 8-5/8" X 4 $\frac{1}{2}$ " csg annulus w/900 sx Cl H cmt cont'g $\frac{1}{4}$ #/sk flocele & 2% CaCl, 500 sx Cl H cmt cont'g $\frac{1}{4}$ #/sk flocele & 2% CaCl & 200 sx Cl H cmt cont'g 10% salt. Rev out 20 sx. Cmt circ to surf.
3463-3606'	1500 gals 15% HCL-LSTNE acid.
3463-3606'	15,000 gals slick 2% KCL wtr cont'g 25#/1000 gal gel, 25#/1000 gal fluid loss additive & $\frac{1}{2}$ gal/1000 gal de-emulsifier & 37,500# 20/40 sd.

INCLINATION REPORT

OPERATOR Atlantic Richfield Company ADDRESS P. O. Box 1710, Hobbs, New Mexico 88240
 LEASE Duthie Andrews Com. WN WELL NO. 4 FIELD _____
 LOCATION 660' FNL, 1980' FEL, Sec. 19, T-23S, R-37E, Lea County, New Mexico

Depth	Angle (Inclination 'degrees)	Displacement	Displacement Accumulated
418	1/4	1.8392	1.8392
940	1/2	4.5414	6.3806
1400	1/2	4.0020	10.3826
1643	1/2	2.1141	12.4967
2143	1/2	4.3500	16.8467
2476	1	5.8275	22.6742
3032	1	9.7300	32.4042
3561	1	9.2575	41.6617
3710	1 1/4	3.2482	44.9099

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

Cactus Drilling Company

By: Ken Hedrick
 Title: Drlg. Supt.

Affidavit:

Before me, the undersigned authority, appeared Ken Hedrick known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

Ken Hedrick
 (Affiant's Signature)

Sworn and subscribed to in my presence on this the 5th day of _____

December 19 75

Jerry L. Morris
 Notary Public in and for the County
 of Lea, State of New Mexico

MY COMMISSION EXPIRES 3-1-76

Seal