

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE*

(Other instructions on reverse side)

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 _____
 b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other P & A

2. NAME OF OPERATOR
Discovery Operating, Inc.
 3. ADDRESS OF OPERATOR
800-D West Wall, Midland, TX 79701
 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
 At surface 467' FSL, 330' FWL, Sec. 34, T25S, R32E, Lea Co., NM
 At top prod. interval reported below
 At total depth

5. LEASE DESIGNATION AND SERIAL NO.

NM 13834

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

DOI Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undesig.-Jennings Dela.Assoc

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

Sec. 34, T25S, R32E

14. PERMIT NO. DATE ISSUED

9/26/80

12. COUNTY OR PARISH

Lea

13. STATE

N M

15. DATE SPUDDED 4/10/81 16. DATE T.D. REACHED 4/25/81 17. DATE COMPL. (Ready to prod.) N/A 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* GR 3315.3 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 4650' 21. PLUG, BACK T.D., MD & TVD N/A 22. IF MULTIPLE COMPLETIONS, HOW MANY? 1 23. INTERVALS DRILLED BY _____ ROTARY TOOLS _____ CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* N/A 25. WAS DIRECTIONAL SURVEY MADE _____

26. TYPE ELECTRIC AND OTHER LOGS RUN U.S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO 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
<u>8 5/8"</u>		<u>915'</u>	<u>11"</u>	<u>550 sx Regular</u>	

29. LINER RECORD					30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	PACKER SET (MD)
<u>B.A</u>					<u>ACCEPTED FOR RECORD</u>	
					<u>ROGER A. CHAPMAN</u>	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRAC, GEL, SQUEEZE, ETC.	
<u>N/A</u>		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)	
<u>Dry Hole - P & A</u>						<u>P & A</u>	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

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

35. LIST OF ATTACHMENTS

Water Analysis, Formation Test Report

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

SIGNED Sandra Page TITLE Secretary-Treasurer DATE 5/13/81

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