

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE

FORM APPROVED

OMB NO. 1004-0137

Expires: February 28, 1995

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. REVR. ☒ Other Recompletion2. NAME OF OPERATOR
Altura Energy LTD3. ADDRESS AND TELEPHONE NO. Attn: Mark Stephens, 338-B, WL2
P.O. Box 4294, Houston, TX 77210-4294 (281) 552-11584. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 1650' FNL x 1650' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED 7/12/79 16. DATE T.D. REACHED 8/13/79 17. DATE COMPL. (Ready to prod.) *1/8/2000

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3246' GL 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 6400' 21. PLUG, BACK T.D., MD & TVD 3965'

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
Top: 3165' Bottom: 3220' Queen

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

27. WAS WELL CORED

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

CASING SIZE/GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
9-5/8 K-55	32.3, 36	1064	12-1/4	Surface 550 sx.	
7 K-55, N-80	20, 23	6400	8-3/4	1177 1270 sx. (via temp. survey)	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD
					SIZE DEPTH SET (MD) PACKER SET (MD)
					2-3/8 3426 --

31. PERFORATION RECORD (Interval, size and number)

3165' - 3185', 3200' - 3220', 4 JSPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3165 - 3220	FRAC - 3000 gal. 'Water Frac-25'; 40,000 gal. 'Delta Frac-25'; 102,000# 16/30 brown sand; 24,800# 12/20 brown sand.

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
1/8/2000		Flowing					Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BSL.	GAS—MCF.	WATER—BSL.	GAS-OIL RATIO	
1/17/2000	24	29/64	→	0	112	0	--	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BSL.	GAS—MCF.	WATER—BSL.	OIL GRAVITY-API (CORR.)		
0	42	→	0	112	0			

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

35. LIST OF ATTACHMENTS

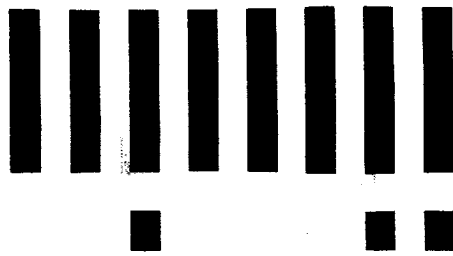
Form 3160-5 (Subsequent Report)

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

SIGNED Mark Stephens TITLE Bureau Analyst (SG) DATE 1/27/2000

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

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.
*This completion



LTR



Job separation sheet

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>WIW</u>	5. Lease Designation and Serial No. LC - 032450(B)
2. Name of Operator Altura Energy LTD	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. Attn: Mark Stephens, 338-B, (281) 552-1158 P.O. Box 4294, Houston, TX 77210-4294	7. If Unit or CA, Agreement Designation NM 71037X
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Letter F, 1650' FNL x 1650' FWL, Sec. 15, T-24-S, R-37-E	8. Well Name and No. South Mattix Unit Federal
	9. API Well No. 30-025-26353 No. 35
	10. Field and Pool, or Exploratory Area Fowler; Upper Yeso
	11. County or Parish, State Lea Co., NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input checked="" type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other _____	<input type="checkbox"/> Dispose Water
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)		
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*		

The subject well is currently a shut-in water injection well in the Fowler; Upper Yeso Pool. The proposed operation is to recomplete the well out of the Unit to the Langlie Mattix; 7-Rivers-Queen-Grayburg (37240) as per the attached procedure.

14. I hereby certify that the foregoing is true and correct		
Signed <u>Mark Stephens</u>	Title <u>Business Analyst (SG)</u>	Date <u>11/30/99</u>
(This space for Federal or State office use)		
Approved by _____	Title _____	Date <u>DEC 03 1999</u>
Conditions of approval, if any: _____		

ROSWELL, NM
BLM

DEC 02 '99

RECEIVED