

PLUGGING RECORD

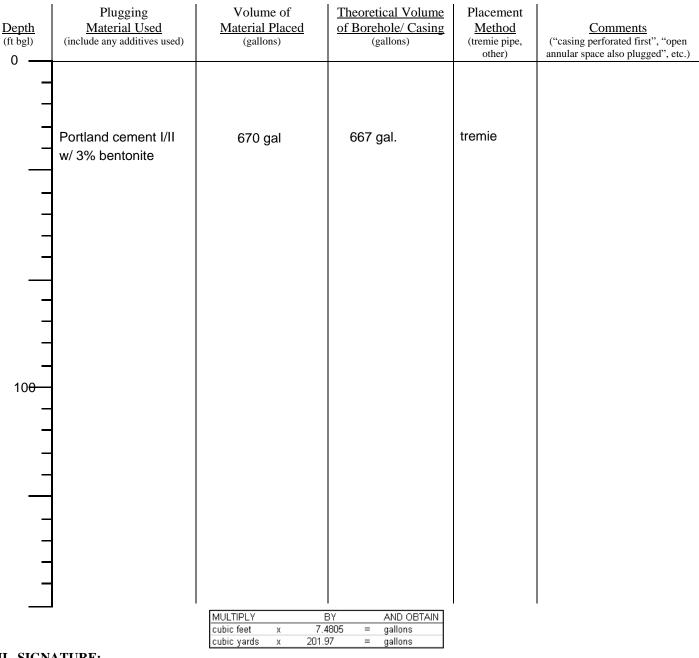


NOTE: A Well Plugging Plan of Operations shall be approved by the State Engineer prior to plugging - 19.27.4 NMAC

I. GENERAL / WELL OWNERSHIP:

State Er	ngineer Well Number:	Wingate 91		
Well owner: US Army				No.:
Mailing	address: 5338 Montgo	omery NE, Suite 300/40	0	
				Zip code: 87109
II. WELL PLUGGING INFORMATION:				
1)	Name of well drilling cor	npany that plugged well:	Geomechanics Southw	est, Inc.
2)	New Mexico Well Driller	License No.: <u>WD-152</u>	2	Expiration Date: April 30, 2017
3)	Well plugging activities were supervised by the following well driller(s)/rig supervisor(s):			
4)	Date well plugging began	: <u>6-24-15</u>	Date well plugging c	oncluded: <u>6-25-15</u>
5)	GPS Well Location:		deg, <u>31</u> min, deg, <u>35</u> min,	
6)	Depth of well confirmed at initiation of plugging as: <u>113</u> ft below ground level (bgl), by the following manner: <u>weighted tape measure</u>			
7)	Static water level measured at initiation of plugging: <u>14.0</u> ft bgl			
8)	Date well plugging plan of operations was approved by the State Engineer: <u>11-7-2014</u>			
9)	Were all plugging activities consistent with an approved plugging plan? <u>Yes</u> If not, please describe differences between the approved plugging plan and the well as it was plugged (attach additional pages as needed):			
Please see attached survey coordinates.				

10) Log of Plugging Activities - Label vertical scale with depths, and indicate separate plugging intervals with horizontal lines as necessary to illustrate material or methodology changes. Attach additional pages if necessary.



For each interval plugged, describe within the following columns:

III. SIGNATURE:

I, <u>Branden L. Sanders</u>, say that I am familiar with the rules of the Office of the State Engineer pertaining to the plugging of wells and that each and all of the statements in this Plugging Record and attachments are true to the best of my knowledge and belief.

Signature of Well Driller

7-15-15