

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Oil Cons.
N.M. DIV-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

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

RECEIVED

1. Type of Well
☐ Oil ☐ Gas ☒ Other
☐ Well ☐ Well
2. Name of Operator
Nearburg Producing Company
3. Address and Telephone No.
3300 North A Street, Building 2, Suite 120, Midland, TX 79705 (432) 686-8235
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
2390 FNL and 830 FEL, Sec 14, 22S, 24E

MAR 25 2004

OCD-ARTESIA

5. Lease Designation and Serial No.
NMNM53219
6. If Indian, Allottee or Tribe Name
7. If Unit or CA, Agreement Designation
8. Well Name and No.
McKittrick 14 Federal SWD #1
9. API Well No.
30-015-21010
10. Field and Pool, or Exploratory Area
McKittrick Hills; Devonian
11. County or Parish, State
Eddy County, New Mexico

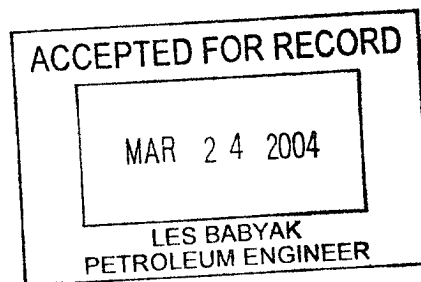
12. CHECK APPROPRIATE BOX(es) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input 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 checked="" type="checkbox"/> Other <u>Pressure Test</u>	<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.)*

See attached chart witnessed by Gerry Guye on 1/29/04



14. I hereby certify that the foregoing is true and correct

Signed

Title Production Analyst

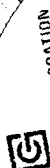
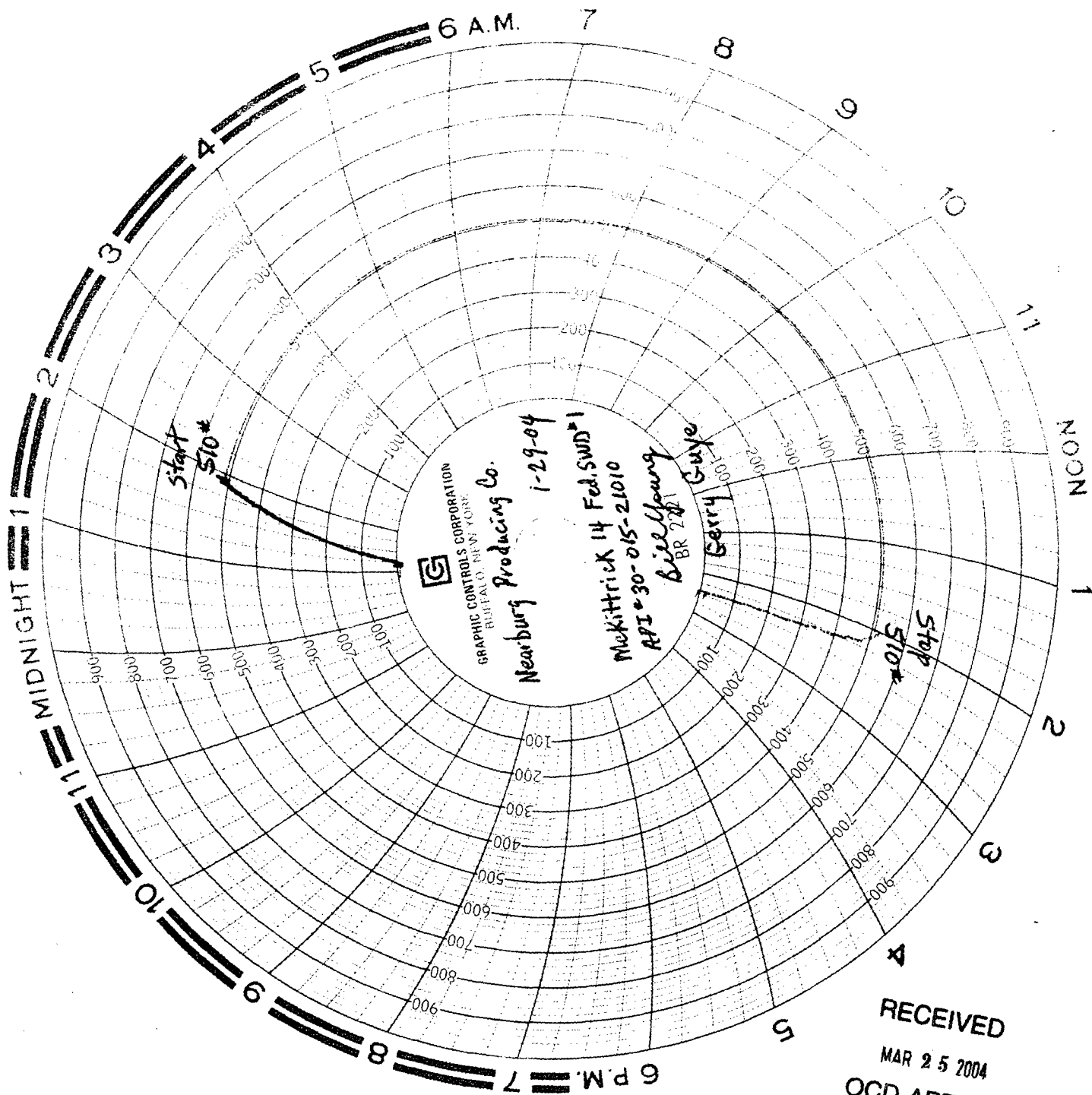
Date 03/23/2004

(This space for Federal or State office use)

Approved by
Conditions of approval, if any:

Title

Date



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

Nearburg Producing Co.

1-29-04

Mackitrick 14 Fed. SWD #1

API #30-015-21010

Bill Young

BR 281

Gerry Guye

BUREAU