

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

ARTESIA, TEX. 80210
SUBMIT IN TRIP...
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR: J.C. Williamson

3. ADDRESS OF OPERATOR: P.O. Box 16 Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980' FSL & 1980' FEL

5. LEASE DESIGNATION AND SERIAL NO.: NM-0554771

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME: T.O.G. FEDERAL

9. WELL NO.: 3

10. FIELD AND POOL, OR WILDCAT: East Burton Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 16-20S-29E

12. COUNTY OR PARISH: Eddy

13. STATE: New Mexico

14. PERMIT NO.: 30-015-21360

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3272.5' GR

RECEIVED JUN 14 '89 O. C. D. ARTESIA, OFFICE

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) 5-1/2" casing	<input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. 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.)*

05/12/89 Ran 28 jts 17# K-ST&C + 95 jts 15.5# K-ST&C set @ 5102' w/605 sx 50/50 poz Class "C" + 5# salt in last 1000', 4-1/2# flo-seal/sx in total cement (total of 5103 set @ 5102').

RECEIVED
JUN 21 11 23 AM '89

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

SIGNED: [Signature] TITLE: Production DATE: 05/31/89

(This space for Federal or State office use)

APPROVED BY: _____ TITLE: _____ DATE: _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side