

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

☒ Oil Well ☐ Gas Well ☐ Other

2 Name of Operator

Collins & Ware, Inc. ✓

3 Address and Telephone No.

303 W. Wall, Ste. 2200, Midland, TX 79701

4 Location of Well (Footage, Sec., T., R., M., or Survey Description)

L, Sec. 31, T22S, R29E
2310' FSL & 330' FWL

5. Lease Designation and Serial No.

NM 61349

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Quahada Ridge 31 Fed. #1

9. API Well No.

30-015-27666

10. Field and Pool, or Exploratory Area

Herradura Bend, East Del.

11. County or Parish, State

Eddy NM

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

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

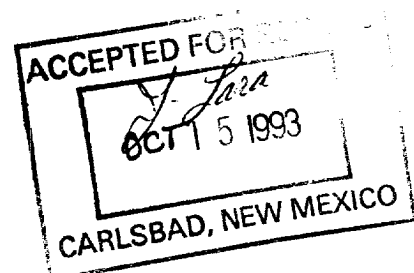
- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other set int. csg.
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(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.)*

9-23-93: Ran 62 jts./8 5/8", 24# & 32#, J55 STC csg. Set @ 2714'. TP= 2721'.
Cmnt. w/ 650 sx./ 35/65 POZ "H" & 6% gel, 5# salt, 1/4#/cellophane; tail in w/225 sx.
"C". Cmnt. circ to surf.= 200 sx. WOC.

9-29-93: TD. Cutting sidewall cores. Running logs.



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

Signed Max Guerry

Max Guerry

Title Regulatory Mgr.

Date 9-29-93

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date