

Form 1160-5  
 (June 1990)

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

5 Lease Designation and Serial No

NM 61349

6 If Indian Allottee or Tribe Name

7 If Unit or CA Agreement Designation

SUBMIT IN TRIPLICATE

1 Type of Well

Oil Well  Gas Well  Other

2 Name of Operator

Collins & Ware, Inc.

3 Address and Telephone No

508 W. Wall, Suite 1200, Midland, Texas 79701 (915) 687-3435

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

UL L, Section 31, T 22S, R 29E  
 2310' FSL & 330' FWL

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, E Delawa

11 County or Parish, State

Eddy, New Mexico

12 CHECK APPROPRIATE BOX(S) 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Acid and Fracture Treatment</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<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.)

11-09-93 Acidize perfs 6104 to 6134 with 3200 gal 7 1/2% HCL.  
 Frac perfs 6104 to 6134 with 12,500 gallons YF130 and 38,260# 16/30 Ottawa sand.

AS  
 JUN 9 1994

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

Signed

*Dianne Sumrall*

Title

Dianne Sumrall  
 Production Clerk

Date

05/20/94

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date