

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OIL CONS COMMISSION
Drawer DD
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

1 Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other (Lateral section)	5 Lease Designation and Serial No NM61349
2 Name of Operator Louis Dreyfus Natural Gas Corp.	6 If Indian, Allottee or Tribe Name
3 Address and Telephone No. 14000 Quail Springs Parkway, Suite 600, OKD, OK 73134 (405) 749-1300	7 If Unit or CA, Agreement Designation
4 Location of Well (Footage, Sec., T., R., M., or Survey Description) Surface 2310' FSL & 330' FWL, UL L, Sec 31, T-22S, R-29E BHL #1 2614' FNL & 489' FWL, UL E, Sec 31, T-22S, R-29E BHL #2 2482' FNL & 371' FWL, UL E, Sec 31, T-22S, R-29E	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. Delaware
	11 County or Parish, State Eddy Co., NM

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 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 Lateral Drilling	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form 1)

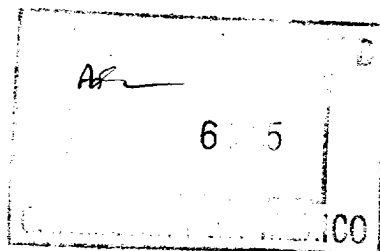
13 Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

SEE ATTACHED FOR DETAILS OF LATERAL DRILLING

RECEIVED

FEB 23 1995

OIL CON. DIV.
DIST. 2



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

Signed Wenton & Sons Title Prod Eng Date 1/18/95
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: