42 to 1

Form 9-331 Dec. 1973

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below.)

Form Approved. Budget Bureau No. 42-R1424 UNITED STATES 5. LEASE DEPARTMENT OF THE INTERIOR NM-0558959 **GEOLOGICAL SURVEY** 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS DACWEEDS BY (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.) ARM OR LEASE NAME BR 4 Federal gas well other well VELL NO. O. C. D. 2. NAME OF OPERATOR SIZTESIA, (FRICE Alpha Twenty-One Production Com FIELD OR WILDCAT NAME 3. ADDRESS OF OPERATOR Washington Ranch Delaware P. O. Box 1206 Jal, N. M. 88252 11. SEC., T., R., M., OR BLK. AND SURVEY OR 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 AREA Sec. 4, T 26 S, R-24 E AT SURFACE: AT SURFACE: 1986' FNL & 330' FEL Sec. 4 AT TOP PROD. INTERVAL: 12. COUNTY OR PARISH 13. STATE Eddy New Mexico AT TOTAL DEPTH: 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. Approved 2-22-73 REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3773.5 ' KB SUBSEQUENT REPORT OF: (NOTE: Report results of multiple completion or zone change on Form 9-330.)

REQUEST FOR APPROVAL 10: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) Continue Temporary Abandonment 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 subsurfaçes locations and measured and true vertical depths for all markers and zones pertinent to this work.)* Due to the present depressed market in oil and gas, the well is uneconomical to operate under present pricing and cost conditions. We request a continuance of our temporary abandonment status. The well was pressure tested on February 27, 1987 to 500 psi for 15 minutes. APPROVED FOR MONTH PERIOD ENDING Aprilis, 1988 Subsurface Safety Valve: Manu. and Type ... Set @ ... 18. I hereby certify that the foregoing is true and correct TITLE Production Supt. DATE April 15, 1987 (This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY: