

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse 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 ☐	5. LEASE DESIGNATION AND SERIAL NO. NMSF 081160F
2. NAME OF OPERATOR Noel Reynolds Torreon Oil Co	6. IF INDIAN, ALLOTTEE OR TRIBE NAME 30-043-0506p
3. ADDRESS OF OPERATOR PO Box 356 Flora Vista, NM 87415	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1862' SL, 2171 EL, Sec. 21, NW1/4SE1/4, T18 N, R3W	8. FARM OR LEASE NAME San Luis Federal Torreon
14. PERMIT NO.	9. WELL NO. #12
15. ELEVATIONS (Show whether DE, RT, GR, etc.) 6750' GL	10. FIELD AND POOL, OR WILDCAT Mesa Verde
	11. SEC., T., R., M., OR B.L.R. AND SURVEY OR AREA T. 18N R. 3W. Sec. 21 NE1/4SW1/4
	12. COUNTY OR PARISH Sandavol
	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	(Other) ☐

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.)
install pumping unit
new tubing & packer

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

Well #12 - Producing well will be into production by 11/1/99 - remains TA.

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

SIGNED Noel Reynolds TITLE Owner DATE 7/1/99

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE Per. E. J. DATE 11/5/99

CONDITIONS OF APPROVAL, IF ANY:
* well has not returned to production, submit plans for P&A by 01-05-00.
*See Instructions on Reverse Side