

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

5. LEASE DESIGNATION AND SERIAL NO.

NMSF 081160F

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

30-043-20925

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Torrecon

9. WELL NO.

19

10. FIELD AND POOL, OR WILDCAT

Mesa Verde

11. SEC., T., R., M., OR BLE. AND

T. 18N R. 3W.

Sec. 21 NE1/4SW1/4

12. COUNTY OR PARISH 13. STATE

SANADOO NM

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
Noel Reynolds

3. ADDRESS OF OPERATOR

PO Box 356 Flora Vista, NM 87415

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1910/S, 2420/E, T/ 18N., R.3W., Sec. 21, NW1/4SE1/4

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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

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.) \*

Well #19 - Gas well - gas to be used to run heaters on lease. This well is the only well on the lease that produces any gas.

RECEIVED  
NOV 10 1999  
OIL CON. DIV.  
SAND

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

TITLE Person. Eng.

DATE 11/5/99

CONDITIONS OF APPROVAL, IF ANY:

IF well has not been returned to production, submit plans to P&A by 01/05/99.  
\*See Instructions on Reverse Side