

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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BLM

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

92 OCT -5 AM 11:43
019 FARMINGTON, N.M.

5. Lease Designation and Serial No.
NM-86492

6. If Indian, Allottee or Tribe Name
N/A

7. If Unit or CA, Agreement Designation
N/A

8. Well Name and No.
Temerity #1

9. API Well No.
30-045-28608

10. Field and Pool, or Exploratory Area
Basin Fruitland Coal

11. County or Parish, State
San Juan Co., N.M.

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

SPEEREX LTD. PARTNERSHIP (505-325-7789)

3. Address and Telephone No.

P.O. BOX 255, FARMINGTON, N.M. 87499

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

1340 ft. FNI, 790' FEL, S29, T25N-R12W, NMPM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other **Request APD extension**
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ 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.)*

Operator hereby requests a 6-month extension of the previously approved (Oct. 10, 1991) Application for Permit to Drill.

RECEIVED

OCT 09 1992

OIL CON. DIV

DIST. 3

APR 10 1993

APPROVED
AS AMENDED

OCT 06 1992

for **AREA MANAGER**

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

Signed

William R. Speer

Title

General Partner

Date

10/2/92

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: