

Form 3160-5
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. SF-078089 | |
| 2. NAME OF OPERATOR Beta Development Company | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| 3. ADDRESS OF OPERATOR 238 Petroleum Plaza, Farmington, NM 87401 | | 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 990' FNL & 1650' FEL | | 8. FARM OR LEASE NAME Scott Federal | |
| 14. PERMIT NO. APR 04 1986 | | 9. WELL NO. 8 | |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6352' D.F. | | 10. FIELD AND POOL, OR WILDCAT Basin Dakota | |
| | | 11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22, T-27N, R-11W | |
| | | 12. COUNTY OR PARISH San Juan | 13. STATE New Mexico |

BUREAU OF LAND MANAGEMENT Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data
FARMINGTON RESOURCE AREA

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <input type="checkbox"/> | |
| (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 HISTORY:

Spud September, 1959.

Set 9-5/8" casing @ 320' cemented w/2/5 sx reg.

Set 5 1/2" casing @ 6781' 10-29-59 cemented w/150 sx reg. + 4% gel

Cement 2nd stage @ 2222' w/100 sx reg.

Well died September, 1981.

PROPOSAL:

Move in work over rig, pull 214 jts. 2-3/8" EUE tubing w/Model "D" seal assembly on bottom, run blanking stinger inside model "D" packer @ 6492' Set full bore packer 60' above and test tubing, blanking plug & packer to 1500#, pull packer up hole, find top & bottom holes in csg. squeeze w/450 sx 6% gel + 2% ca. cl. W.O.C. 16-18 hrs. Drill out cement and test all casing to 1500#, if leak is found resqueeze, if not pull blanking seal from model "D" packer, run tubing back w/seal assembly and put well back on production.

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

SIGNED

TITLE Superintendent

DATE April 2, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCC

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

APR 11 1986
FARM AREA MANAGER