

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on re-  
verse 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 <input type="checkbox"/>	2. NAME OF OPERATOR Beta Development Company	3. ADDRESS OF OPERATOR 238 Petroleum Plaza, Farmington, NM 87401	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1850' FSL & 1830 FWL	15. ELEVATIONS (Show whether OF, AT, OR, AND) 6143' GR
14. PERMIT NO.	15. ELEVATIONS (Show whether OF, AT, OR, AND) BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA			

5. LEASE DESIGNATION AND SERIAL NO. NM-0359211	6. IS INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME Oneda Federal	9. WELL NO. 1	10. FIELD AND POOL, OR WILDCAT Basin Dakota	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T-27N, R-11W	12. COUNTY OR PARISH San Juan	13. STATE New Mexico
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16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		<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.)\*

9-4-84 Move in P & A rig.  
Fish 1½" tubing from well (6 days), shot tubing off @ 5358'.  
Spot 40 sx class "B" cement 5358-4913, pull stretch on 4½" csg. show free @ 1600', shot csg. into @ 4585', shot csg. into @ 2555', shot csg. @ 1650' could not pull, shot csg. @ 1450' could not pull, shot csg. @ 1209' pipe free, lay down 4½" csg.  
Spot 40 sx @ 4663'-4173', load hole with 9.6 mud, spot 40 sx class "B" cement 2555-2115', spot 40 sx class "B" cement 1670-1230', tag cement in csg. stub @ 1230', spot 30 sx 1230-1150'  
spot 120 sx 50' below Ojo-Alamo 700-450'  
spot 60 sx 248-148'.  
spot 15 sx in top of surface pipe  
Install dry hole marker, clean up location and re-seed 9-13-84.

RECEIVED  
OCT 11 1984

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

SIGNED O. E. Bray Jr. TITLE Superintendent

OIL CON. DIV.

DIST. 3 DATE September 24, 1984

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

\*See Instructions on Reverse Side