

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	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Beta Development Company	8. FARM OR LEASE NAME Holloway Federal
3. ADDRESS OF OPERATOR 238 Petroleum Plaza, Farmington, NM 87401	9. WELL NO. 5-E
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 980' FNL & 790' FWL	10. FIELD AND POOL, OR WILDCAT Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7, T-27N, R-11W	12. COUNTY OR PARISH San Juan
13. STATE New Mexico	
14. PERMIT NO. 30-045-25829	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6100' GR

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 PLANE ☐	(Other) ☐	

17. 5 day start up notice: ☒ (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

18. 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 well.)

5 day start up notice:

First delivered gas to El Paso's pipe line system February 13, 1985

RECEIVED
MAR 12 1985
OIL CON. DIV.
DIST. 3

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

SIGNED John B. Hocking

TITLE Asst. Supt.

ACCEPTED FOR RECORD 1985

(This space for Federal or State office use).

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE MAR 11 1985

BY Sh
FARMINGTON RESOURCE AREA

NMOCC

*See Instructions on Reverse Side