

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse 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.)

OIL WELL ☐ CAR WELL ☒ OTHER

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

501 Airport Drive, Farmington, N M 87401

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

At surface

930' FSL x 480' FWL

BUREAU OF LAND MANAGEMENT

WASHINGTON RESOURCE AREA

5641' GR

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:

SUBSEQUENT REPORT OF:

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

FRACURE TREATMENT

SHOOTING OR ACIDIZING

(Other) completion

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.)

Moved in and rigged up service unit on 6-18-85. Total depth of the well is 6270' and plugback depth is 6223'. Pressure tested production casing to 4800 psi for 30 minutes. Perforated the following intervals: 6018'-6032', 6088'-6156', 4 jspf, .45" in diameter, for a total of 328 holes. Fraced interval 6018'-6156' with 90,000 gal 70 quality foam and 130,900# 20-40 brady sand. Landed 2-3/8" tubing at 6185' and released the rig on 7-2-85.

RECEIVED
JUL 26 1985
OIL CON. DIV.
DIST. 3

I hereby certify that the foregoing is true and correct

SIGNED Robert Lawson

TITLE District Adm Supervisor

DATE 7-16-85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA

BY