

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
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 1550' FSL & 1450' FEL	
14. PERMIT NO.	15. ELEVATIONS (Show whether on top of, etc.) 5759 GL

5. LEASE DESIGNATION AND SERIAL NO. SF-080469	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Fogelson	
9. WELL NO. 1-2	
10. FIELD AND POOL, OR WILDCAT Basin Dakota	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 2, T-29N, R-11W	
12. COUNTY OR PARISH San Juan	13. STATE New Mexico

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"/>	

SUBSEQUENT REPORT OF:

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

9-27-85 Rig up work over unit, rig up B.O.P. work donut loose, lay down 1½" tubing (43 jt's) tubing was parted.
Pick up 2-3/8" 8rd J-55 tubing for working string, fish 1½" tubing out of well, total of 205 jt's, trip in with 3-3/4" bit and clean out to 6745' circulate hole clean, P.O.H. pick up packer with on & off tool and profile nipple, trip in hole with 210 jts 2-3/8" tubing, set packer @ 6404' with tail pipe @ 6535', land tubing on donut, swab well 6 hrs. well kicked off.

10-2-75 Released rig 10-2-85.

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

SIGNED D. E. Baughman

TITLE Dist. Supt.

ACCEPTED FOR RECORD 1985

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE OCT 30 1985

FARMINGTON RESOURCE AREA

BY SMV

*See Instructions on Reverse Side

NM000