

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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.)

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR D.J. SIMMONS</p> <p>3. ADDRESS OF OPERATOR P.O. BOX 1469, FARMINGTON, N.M. 87499</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1820' FNL, 910' FEL</p> <p>14. PERMIT NO. 15. ELEVATIONS (Show whether OF, RT, GR, etc.) 6474' GL</p>	<p>5. LEASE DESIGNATION AND SERIAL NO. SF 080247-A</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME A.B. GEREN</p> <p>9. WELL NO. 4</p> <p>10. FIELD AND POOL, OR WILDCAT BASIN FRUITLAND COAL</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 25-T29N-R9W</p> <p>12. COUNTY OR PARISH 13. STATE SAN JUAN N. MEX</p>
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16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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 type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>SPUD WELL</u> <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.)*

5-29-90: SPUDDED WELL AT 3:00PM 5-29-90. DRILLED 225' RAN 5 JTS 8-5/8" 24.0# H-40 CSG. (212.24) SET AT 221.24. CEMENTED W/140 SX CLASS "B" (165 CU.FT) CIRC TO SURFACE.WOC 12 HRS. TESTED 600 #/30 MIN.HELD O.K.

6-03-90 DRILLED TO TD AT 3042'. RAN 74 JTS 4-1/2" 10.5# K-55 8RD CSG. (3032.20') SET AT 3041.20'. STAGE TOOL SET AT 2219.63'. CEMENTED 1ST STAGE W/100 SX CLASS "B" W/1% CACL & 5/10% FLUID LOSS ADDITIVE (118 CU.FT.) P.D. 11:30 AM 6-3-90. CEMENTED 2ND STAGE W/450 SX CLASS 'B' 65/35 POZ, 6% GEL, 10% SALT & 3/10% FRICTION REDUCER. TAILED W/100 SX CLASS "B" W/1% CACL & 3/10% FRICTION REDUCER.(928 CU.FT.) CIRC 2 BBL CMT WATER TO SURFACE. P.D. 3:45 PM 6-3-90. WOC 12 HRS.

JUL 1 1990
OIL CON. DIV
DIST. 3

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

SIGNED [Signature] TITLE PETROLEUM ENGINEER DATE 6-4-90

ACCEPTED FOR RECORD

JUL 05 1990

FARMINGTON RESOURCE AREA
BY [Signature]

*See Instructions on Reverse Side