

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse 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.)

1.

OIL ☐ GAS ☐  
WELL WELL ☒ 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

2220' FNL & 1540" FEL  
SW $\frac{1}{4}$  of NE $\frac{1}{4}$

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6022' G.R.

5. LEASE DESIGNATION AND SERIAL NO.

SF-078138

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Ross 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. 23, T-30N, 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

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(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.)\*

4-16-87

We at Beta Development Company at this time do ask for a 15 day extension to the casing repair order, due to one of our partners in this well, they say they can't find their copies of expenditures approval.

Extended Until 5/3/87

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

SIGNED

*D. E. Bayler*

TITLE Superintendent

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

DATE April 16, 1987

APR 17 1987

*James Skellin*  
AREA MANAGER  
FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side