

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0133
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-067968

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS 240

(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

2. NAME OF OPERATOR
SIRGO-COLLIER, INC.

3. ADDRESS OF OPERATOR
P. O. BOX 3531, MIDLAND, TEXAS 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
2300' FSL 1450' FEL, Section 30, T-24-S, R-38-E

7. UNIT AGREEMENT NAME
WDOSU

8. FARM OR LEASE NAME

9. WELL NO.
~~30~~-75

10. FIELD AND POOL, OR WILDCAT
DOLLARHIDE QUEEN

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 30, T-24-S, R-38-E

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
GL 3165' KB 3176.5'

12. COUNTY OR PARISH 13. STATE
LEA NM

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) Spud, cement surface & prod. string	
(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.)*

7-18-87 - Spudded with 12-1/4" bit - TD 420'
Ran 416' of 8-5/8" 24# J grade, type M slotted shoe and two centralizers. Cemented 250 sx Class C cement, circ. 100 sx to pit.

7-20-87 - Tested 8-5/8" 600# 1 hr., test okay.

7-24-87 - TD 3950'
Ran 3950' 5-1/2", 15.50 J grade pipe. Cemented 800 sx Hal-Lite + 200 sx Class C 15# salt 2% CaCl2 1/4" flow seal and circ. 225 sx to pit.

ACCEPTED FOR RECORD
AUG 18 1987
SJS
CARLSBAD, NEW MEXICO

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

SIGNED Amy L. Whitley TITLE Agent DATE 8-4-87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED
AUG 17 1987
OCD
HOBBS OFFICE