

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION
P.O. BOX 1980
HOBBS, NEW MEXICO 88240
FORM APPROVED
No. 1004-0135
Expires: March 31, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-0250
2. Name of Operator ARMSTRONG ENERGY CORPORATION	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 1973, Roswell, New Mexico 88202-1973 623-8726	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2086' FSL & 556' FWL Sec. 1 T20S R34E	8. Well Name and No. KF Quail #1
	9. API Well No.
	10. Field and Pool, or Exploratory Area South Lea San Andres
	11. County or Parish, State Lea, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Put Well Into Production</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water
	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

Current authority to suspend production on this well was to expire on 12-31-93. This well was pulled and a hole was found in the tubing string that would keep this well from pumping. The defective joint of tubing was replaced, and a reconditioned pump was run back in. The pumping unit also required repairs. **This well was placed back into production on December 9, 1993 and began producing at a rate of 5 barrels of oil per day.**

ACCEPTED
(OR G. SGD.) DAVID R. GLASS
DEC 16 1993
CARLSBAD, NEW MEXICO

14. I hereby certify that the foregoing is true and correct		
Signed <u>John K. Swagg</u>	Title <u>Operations Supervisor</u>	Date <u>12-10-93</u>
(This space for Federal or State office use)		
Approved by _____	Title _____	Date _____
Conditions of approval, if any:		