

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR
(Other instructions
verse side)

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ON re

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-0250

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

K.F. Quail Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

South Lea San Andres

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

Sec. 1, T20S, R34E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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 GAS WELL OTHER

2. NAME OF OPERATOR
Brady W. Production, Inc.

3. ADDRESS OF OPERATOR
P. O. Box 9128, Midland, TX 79708

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
Unit Letter L, 2086' FSL & 556' FWL

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3699' KB 24' AGL

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(Other)

(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.)*

Proposed starting date- March 6, 1991

MIRU PU. Pull pump and tubing. Run retrievable bridge plug and packer to acidize and swab test well. Return well to production.

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

SIGNED

Michael D. Brady

TITLE

(915)687-5045
Vice-President

DATE

Feb. 27, 1991

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

3-7-91

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side