

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions
verse side)

Form approved.
Budget Bureau No. 1004-0-1-3
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-0631

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

-

7. UNIT AGREEMENT NAME

-

8. FARM OR LEASE NAME

Federal 11-20-34

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Lea (Bone Spring)

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

Sec 11, T-20-S, R-34-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

National Coop. Refinery Assoc.

3. ADDRESS OF OPERATOR

415 W. Wall, Suite 2215, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface

SE/4, NW/4 Section 11
1980' FNL & 2130' FWL

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

-

3654' GL

16. 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

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Plug Back

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)

The Federal 11-20-34 Well #1 has been recompleted from a gas well in the Lea (Penn) field to an oil well in the Lea (Bone Spring) field.

The work was completed 3-01-90.

See the attached summary of the work performed.

Tests were witnessed by Bill McManus with the BLM in Hobbs, New Mexico.

APR 4 10 57 AM '90
CARLSBAD AREA

RECEIVED

ACCEPTED FOR RECORD

APR 11 1990

CARLSBAD, NEW MEXICO

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

SIGNED Carrie A. Bay

TITLE Production Clerk

DATE 4-03-90

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side