



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 **WIW**

2. NAME OF OPERATOR
Breck Operating Corp.

3. ADDRESS OF OPERATOR
P.O. Box 911, Breckenridge, Texas 76024

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
Unit Letter "H", 1980' FNL, 660' FEL

14. PERMIT NO. _____

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4242' DF

5. LEASE DESIGNATION AND SERIAL NO.
LC 062178

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Milnesand (SA) Unit

8. FARM OR LEASE NAME

9. WELL NO.
513

10. FIELD AND POOL, OR WILDCAT
Milnesand (San Andres)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 24, T-8-S, R-34-E

12. COUNTY OR PARISH
Roosevelt

13. STATE
New Mexico

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 checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (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.)*
- 1) POOH w/ 2-3/8" tubing & 4-1/2" Baker Lok-Set packer.
 - 2) RIH w/ workstring & set retrievable bridge plug @4550'.
 - 3) Test for casing leak by moving packer uphole & pressuring up on tubing to 500 psi.
 - 4) Repeat this procedure until the hole and/or holes are found.
 - 5) Dump 2 sx. sand on RBP & stage squeeze w/100 sx. of cement.
 - 6) Drill out cement and test squeeze job to 500 psi.
 - 7) If squeeze does not hold repeat steps 5 & 6 until the hole and/or holes are squeezed off.
 - 8) POOH w/ workstring. RIH w/ 2-3/8" tubing & 4-1/2" Baker Lok-Set packer.
 - 9) Set packer at 4550' and return to injection.

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

SIGNED *Samuel D. White* TITLE Petroleum Engineer DATE 6/16/86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
 CONDITIONS OF APPROVAL, IF ANY: SUBJECT TO LIKE APPROVAL BY STATE

APPROVED
PETER W. CHESTER
JUN 19 1986
 BUREAU OF LAND MANAGEMENT
 ROSWELL RESOURCE AREA

*See Instructions on Reverse Side