

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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. <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM 53320	
2. NAME OF OPERATOR Samedan Oil Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1616 Glenarm Pl, #2550, Denver, CO 80202		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1880' FEL and 1660' FSL Sec 14, T3N-R12W, Catron County, NM		8. FARM OR LEASE NAME Laguna Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7330' GR		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NWSE Sec 14, T3N-R12W	
		12. COUNTY OR PARISH Catron	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	Weekly Report		<input checked="" 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.)*

Casing: 20" Steel Conductor Pipe set at 80' and cemented to surface.
9-5/8", 36#, K-55 set at 1915' and cemented to surface.
7", 23#, N-80 set at 3992' and cemented with 150 sacks.

11/3/84 Set slips on 7" casing. Nipple up BOP's. Change pipe rams to 3 1/2". Pick up 6 1/4" bit, 4-3/4" drill collars and 3 1/2" drill pipe.

11/4/84 to 11/9/84 Drill a 6 1/4" hole to 5915'.

11/9/84 Ran DIL/GR/SP log from 5912' to 3992'.
Ran LDT/CNL/GR log from 5912' to 3992'.
Ran BHC Sonic/GR log from 5912' to 3992'.
Ran CNL/GR log from 3992' to 1910'.
Ran Velocity Survey from 5900' + to surface.

LOG TOPS:	Tres Hermanos	2070'	Salt	4652'
	Dakota	2196'	Base Salt	4778'
	Chinle	2366'	Meseta Blanca	5076'
	San Andres	3608'	Abo	5630'
	Glorietta	3914'	Granite Wash	5730'
	Yeso	4014'		

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

SIGNED **Gary L. Brune**

TITLE **Division Production Superintendent**

DATE **11/09/84**

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF

ACCEPTED FOR RECORD
APPROVAL, IF ANY:
PETER W. CHESTER

DEC 6 1984

*See Instructions on Reverse Side