

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

*OCW - Artesia*

*cls 14*

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**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

5. Lease Designation and Serial No.  
NMO4393

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
DEKALB FEDERAL #2

9. API Well No.  
30-015-03959

10. Field and Pool, or Exploratory Area

SO LAKE GRAYBURG SA  
11. County or Parish, State

EDDY NM

**SUBMIT IN TRIPLICATE**

1. Type of Well

Oil Well  Gas Well  Other

2. Name of Operator

C E LaRUE & B N MUNCY JR. ✓

3. Address and Telephone No.

P O BOX 1370 ARTESIA, NM 88211-1370

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FSL & 1980' FEL SEC 31, T16S, R30E

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

Notice of Intent  
 Subsequent Report  
 Final Abandonment Notice

TYPE OF ACTION

Abandonment  Change of Plans  
 Recompletion  New Construction  
 Plugging Back  Non-Routine Fracturing  
 Casing Repair  Water Shut-Off  
 Altering Casing  Conversion to Injection  
 Other  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.)\*

WORK OVER WELL. PUT BACK ON PRODUCTION 09/25/00

RECEIVED  
2000 SEP 21 A 10:51  
BUREAU OF LAND MGMT.  
CARL SPIRO RESOURCE AREA

*Done  
2000*

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

Signed

*[Signature]*

Title

OWNER

Date

09/25/00

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date