

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N.M. Oil Cons. Division
811 S. 1st Street
Artesia, NM 88210-2834

clsr

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

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-0467930
2. Name of Operator PREMIER OIL & GAS, INC	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. BOX 1246, ARTESIA, NM 88210 505-748-3303	7. If Unit or CA. Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330 FNL 330 FEL, SEC. 22-T17S-R30E UNIT A	8. Well Name and No. DALE H PARKE "A" TR 1 #23
	9. API Well No. 30-015-30738
	10. Field and Pool, or Exploratory Area LOCO HILLS PADDOCK
	11. County or Parish, State EDDY, NM

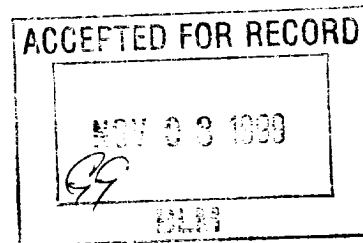
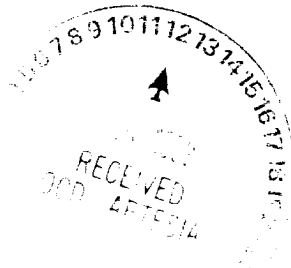
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other TD, CMT CSG
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion or 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.)*

TD WELL @ 3:45 A.M. 11/1/99. DRLD 7 7/8" HOLE TO 5038', RAN 123 JTS 5 1/2" 17# J-55 CSG TO 5023', CMTD 1ST STAGE W/400 SX MOD SUPER H, PLUG DOWN @ 7:00 A.M. 11/2/99. CIRC 100 SX TO SURF, CMTD 2ND STAGE W/900 SX HALL LITE & 250 SX MOD SUPER H, PLUG DOWN @ 2:00 P.M., CIRC 225 SX TO SURF. WOC 18 HRS, TSTD CSG TO 1500# FOR 30 MINUTES - HELD OK. DV TOOL @ 3201'.



14. I hereby certify that the foregoing is true and correct
Signed Robin Cockrum Title AGENT Date 11/03/99

(This space for Federal or State office use)
Approved by _____ Title _____ Date _____
Conditions of approval, if any:

DEPARTMENT OF LAND MANAGEMENT
RECEIVED
NOV 04 1999
666 70 NOV
PROJ