

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions
reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-16331

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

BCR Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

East Loving Delaware

11. SEC., T., S., M., OR BLK. AND
SUBDIV OR AREA

Sec. 3-23S-28E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

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 ☐ API # 30-015-27043

2. NAME OF OPERATOR
Bird Creek Resources, Inc.

3. ADDRESS OF OPERATOR
810 South Cincinnati, Suite 110 Tulsa, Oklahoma 74119

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
560' FNL, 1750' FEL, Unit B
Section 3 T23S R28E
4002 - 1992
O. C. D.
STATE OFFICE

14. PERMIT NO. 15. ELEVATIONS (Show whether OF, RT, OR, etc.)
3030' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANE ☐
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☒
(Other) Correction ☒

(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.)*

On Sundry Notice dated 7-13-92, the depth of 3977' reported for the two stage tool was incorrect. The correct setting of the 5 1/2" tool is 4827'.

ACCEPTED FOR RECORD

5 1992

CARLSBAD, NEW MEXICO

918-582-3855

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

SIGNED Brad D. Burks

TITLE Brad D. Burks, Agent

DATE 7-22-92

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side