

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

SUBMIT IN TRIPlicate
(Other instructions on
reverse side)

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

CBF

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

2. NAME OF OPERATOR: J.C. WILLIAMSON

3. ADDRESS OF OPERATOR: P.O. BOX 16 MIDLAND, TEXAS, 79705

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface: 990' FSL & 990' FWL

5. LEASE DESIGNATION AND SERIAL NO.: NM-24777

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME: SUNEX FEDERAL UNIT

8. FARM OR LEASE NAME:

9. WELL NO.: 2

10. FIELD AND POOL, OR WILDCAT: *Ind. N. base draw*
EAST BRUSHY DRAW DELAWARE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: SEC. 14, T26S, R30E

12. COUNTY OR PARISH: EDDY 13. STATE: NEW MEXICO

14. PERMIT NO.: 15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3152.0' GR

RECEIVED BY
JAN -9 1987
O. C. D.

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 type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>5-1/2" casing</u>	
(Other) <input 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.)*

12-24-86 Ran 5-1/2" casing. Set and cemented @ 6250' w/Howco 500 sx Class "C", 50-50 poz, 6#/sx salt, 1/4# sx cello-seal. Plugged down @ 2:30 a.m. 12-24-86.

ACCEPTED FOR RECORD

JAN 7 1987

Jm
CARLSBAD, NEW MEXICO



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

SIGNED Jan Pfister TITLE Production DATE 12-31-86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side