Form 3160-5 (November 1983)		NITED STATES	era e set. C	TN DITOLOR	Form approve Budget Bure	au No. 1004_013
(Formerly 9-331	DEPARTM	ENT OF THE IN	ERIOR Verse ha	6) 加熱的recions on te	5. LEASE DESIGNATI	ust 31 1985
		OF LAND MANAGE		CEIVED	NM-0522	TER CO MAINE WALL
(Do not u	SUNDRY NOTIC se this form for proposa Use "APPLICAT	CES AND REPOR	IS ON WELL plug back/to a difference such propoper(E)	S ent reservoir.		THE OR TRIBE NAME
סור בא י	3AB (***)		OAR	68, 14 Eh 2	7. UNIT AGREEMENT	NAME
2. NAME OF OPER		/ .	Ans	Poker Lake	8. PARM OR LEASE NAME	
	B. Gillespie, c	lr. V	,	35	Poker Lake	
P.O. BOX		exas 79702		COSTACO	9. WELL NO.	
4. LOCATION OF W	ELL (Report location cle	arly and in accordance with	any State requireme	onts •	70 10. FIELD AND POOL,	OR WILL BOLL
See also spuce 17 below.) At surface			F	Wildcat (1/1/1/2		
810' FSL & 810' FEL				11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA		
810, F2F	% 810, FFF		,		-	
14. PERMIT NO.		15. ELEVATIONS (Show wheth	er DF, RT, GR, etc.)	Sec 28-T24S-R31E 12. COUNTY OR PARISH 13. STATE		
		3472.7' GR 348	88.2' K.B.		Eddy	NM
16.	Check App	ropriate Box To Indica	ie Nature of Not	ice. Report. or C		
NOTICE OF INTENTION TO					TENT REPORT OF:	
TEST WATER S	HUT-OFF PU	LL OR ALTER CASING	WATER S	BDT-0FF	REPAIRING	WELL
FRACTURE TREA		LTIPLE COMPLETE	FRACTUR	E TREATMENT	ALTERING	CABING
SHOOT OH ACID	[ANGE PLANS	1 .	G OR ACIDIZING X	ABANDONM	ENT*
(Other)			(Other)		of multiple completion letion Report and Log i	n or Well
17. DESCRIBE PROPO- proposed wor nent to this w	SED OR COMPLETED OPERA k. If well is directions ork.)	TIONS (Clearly state all per lly drilled, give subsurface	tinent details, and g locations and measu	lve pertinent dates, red and true vertice	including estimated d al depths for all marks	orm.) ate of starting ansers and sones perti-
1/19/89	2 shots per f	2500 Gallons 7.				
1/25/89	Rigged up Dow plus 16,500 l rate 10 bpm a	ell. Ran frac t bs. of 20/40 san t 2500 psi.	reatment con d, containin	sisting of 8 g 350 scf/bb	3750 gallons o ol nitrogen, a	f gel verage
				:	!	
16 I hereby certify SIGNED	that the foregoing is to		Production !	Manager		1/89
(This space for	Federal or State office t	<u> </u>				1103
APPROVED BY		TITLE _			DATE	N
	F APPROVAL, IF ANY					
					1 1 1	•

*See Instructions on Reverse Side

SJC