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DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT amnington, NM

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

5. Lease Designation and Serial No. NM 105189

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

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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

	11301111	7. If Unit or CA, Agreement Designation	
SUBMIT IN TR	IPLICATE		
1. Type of Well			
☐ Oil X Gas ☐ Other	PO APR 2000	8. Well Name and No.	
2. Name of Operator		Byrne Federal 24-1X	
D.J. Simmons Co.	CONTRACTOR STATE	9. API Well No.	
3. Address and Telephone No.	A Maria	3003927556	
1009 Ridgeway Place. Suite 200, Farmington			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		West Lindreth Gallup / Blanco MV	
Surface Location: 1623' FNL x 956' FWL, Section 24, T25N, R3W4E11300		11. County or Parish, State	
BHL: 1902' FNL x 2160' FWL, Section 24		Rio Arriba County, NM	
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
TYPE OF SUBMISSION	TYPE OF	TYPE OF ACTION	
_	☐ Abandonment	☐ Change of Plans	
☐ Notice of Intent	☐ Recompletion	☐ New Construction	
•	Plugging Back	☐ Non-Routine Fracturing	
X Subsequent Report	Casing Repair	☐ Water Shut-Off	
	Altering Casing	☐ Conversion to Injection	
Final Abandonment Notice	X Other Spud and Surface Csg	☐ Dispose Water	
	<u></u>	(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 depth for all markers and zones pertinent to this work.)*			
Wo walls work.			
DJS spudded the above referenced well on 1/19/04@ 12:45 p.m. with Aztec Rig 124. Ran and cemented 13 3/8"			
builded during to 200. Compared to but	Auto.	ALBUQUERQUE	
		16 BE	
		⊅ ≥ → €	
		AM 10:	
14. Thereby contife that the formation is torong and content			
14. I hereby certify that the foregoing is true and correct		z O	
Signed Role L	Title Operations Manager	.≆. ⊖ Date: 2/27/04	
Robert R. Griffee	Time Characolla manager	Dave. 421104	
(This space for Federal or State office use)			
Approved by /s/ David R. Sitzler Division of Multi-Resources APR 1 2 2004			
Approved by			

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.