

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

NOEL REYNOLDS D/A TORREON OIL COMPANY

3. Address and Telephone No.

1316 JUNIPER LANE, FORT WORTH, TX 76126

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1670' FSL, 2294' FEL (NW/4 SE/4)

SEC. 21, T18N, R3W

5. Lease Designation and Serial No.

SF 081160-F

6. If Indian, Allottee or Tribe Name

12 35

7. If Unit or CA, Agreement Designation

8. Well Name and No.

SAN LUIS FEDERAL #11

9. API Well No.

05062  
30043879940051

10. Field and Pool, or Exploratory Area

SAN LUIS MESA VERDE

11. County or Parish, State

SANDOVAL, NM

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

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

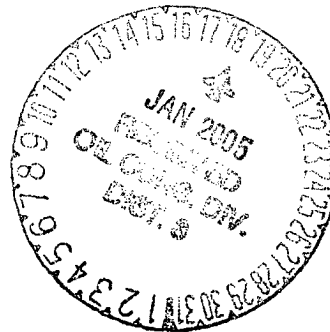
TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other WINTER SHUT-IN  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(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 depths for all markers and zones pertinent to this work.)\*

DUE TO FREEZING TEMPERATURES THIS WELL WILL  
BE SHUT-IN 12/15/04, AND PRODUCTION RESUMED  
BY 4/15/05. PRODUCED WATER IS FRESH.



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

Signed [Signature] Title AGENT

Date 12-10-04

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_

ACCEPTED FOR RECORD

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.

\*See Instruction on Reverse Side  
NMOCD

FARMINGTON FIELD OFFICE  
BY [Signature]