

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 5. LEASE DESIGNATION AND SERIAL NO NMSF 081160F |
| 2. NAME OF OPERATOR Noel Reynolds | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR PO Box 356 Flora Vista, NM 87415 | 7. UNIT AGREEMENT NAME 30-043-20819 |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1810' FSL and 1620' FEL | 8. FARM OR LEASE NAME Torreón San Luis Fed. |
| | 9. WELL NO. #18 |
| | 10. FIELD AND POOL, OR WILDCAT Mesa Verde |
| | 11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA T. 18N R. 3W. Sec. 21 NE1/4SW1/4 |
| 14. PERMIT NO. | 12. COUNTY OR PARISH Sandavol |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6750' GL | 13. STATE NM |

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

*install tubing Sept test
or abandon & plug*

Well # 18 - Will be put back into production by 11/99

RECEIVED
NOV 10 1999

COPIES DESTROYED
1999

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

SIGNED

Noel Reynolds

TITLE

Owner

DATE

7/1/99

(This space for Federal or State office use)

APPROVED BY

[Signature]

TITLE

Re-formation Engineer

DATE

11/5/99

CONDITIONS OF APPROVAL, IF ANY:

*If well has not returned to producing status
please submit plans to BLM by 01/05/00.*

*See Instructions on Reverse Side