

2-MMS (Frm)
Form 3160-5
(November 1983)
(Formerly 9-331)

1-File 1-LF

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

3. LEASE DESIGNATION AND SERIAL NO.

NM-024907

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Barker Dome Gas Com

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 23, T31N, R13W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

SUNDRY NOTICES AND REPORTS ON WELLSROOM
(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

LADD PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR

P.O. Box 420, Farmington, NM 87499-0420

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

1190' FNL - 790' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether BF, ST, CR, etc.)

5795' GL

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Well Returned to Production

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

X

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.)*

Well Placed on Production 12:45

XX XX

P.M.

11/22/89

Type of Production _____ Crude Oil

_____ Crude Oil & Casinghead Gas

_____ Natural Gas

X _____ Natural Gas & Entrained
Liquid Hydrocarbons

Communitization Agreement Number _____

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

SIGNED

Kelma Farley

TITLE Prod. Report Supervisor

DATE

12/26/89

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

BY *W.E.*

FARMINGTON

BY