

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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verse side)

BH Roswell District  
Modified Form No.  
ND60-3160-4

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.<br>LC 063659                       |
| 2. NAME OF OPERATOR<br>JAR, Inc.                                                                                                                                                   | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                   |
| 3. ADDRESS OF OPERATOR<br>1001 - 8th Street, Levelland, TX 79336                                                                                                                   | 7. UNIT AGREEMENT NAME                                                 |
| 3a. Area Code & Phone No.<br>806-894-6044                                                                                                                                          | 8. FARM OR LEASE NAME<br>Great Western Federal                         |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>660' FSL & 660' FWL Section 21<br>Unit m | 9. WELL NO.<br>1                                                       |
| 14. PERMIT NO.                                                                                                                                                                     | 10. FIELD AND POOL, OR WILDCAT<br>Sawyer San Andres (Assoc)            |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>3940                                                                                                                             | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec. 21, T9S, R38E |
|                                                                                                                                                                                    | 12. COUNTY OR PARISH<br>Lea                                            |
|                                                                                                                                                                                    | 13. STATE<br>NM                                                        |

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

NOTICE OF INTENTION TO:

|                     |                                     |                      |                          |
|---------------------|-------------------------------------|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/>            | PULL OR ALTER CASING | <input type="checkbox"/> |
| FRACTURE TREAT      | <input type="checkbox"/>            | MULTIPLE COMPLETION  | <input type="checkbox"/> |
| SHOOT OR ACIDIZE    | <input type="checkbox"/>            | ABANDON*             | <input type="checkbox"/> |
| REPAIR WELL         | <input checked="" type="checkbox"/> | CHANGE PLANE         | <input type="checkbox"/> |
| (Other)             | <input type="checkbox"/>            |                      |                          |

SUBSEQUENT REPORT OF:

|                       |                          |                 |                          |
|-----------------------|--------------------------|-----------------|--------------------------|
| WATER SHUT-OFF        | <input type="checkbox"/> | REPAIRING WELL  | <input type="checkbox"/> |
| FRACTURE TREATMENT    | <input type="checkbox"/> | ALTERING CASING | <input type="checkbox"/> |
| SHOOTING OR ACIDIZING | <input type="checkbox"/> | ABANDONMENT*    | <input type="checkbox"/> |
| (Other)               | <input type="checkbox"/> |                 |                          |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)  
(If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

17. DESCRIBE PROMISED 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.)

Plan to run in hole with 2 3/8 N-80 tubing with spear to tag fish @ 680 and pull tubing string on Wednesday, March 7, 1990.

RECEIVED  
MAR 6 10 56 AM '90  
O&G  
AREA

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

SIGNED K. J. Royce TITLE President

(This space for Federal or State office use)

DATE 3-5-90

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

3 12-90