

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

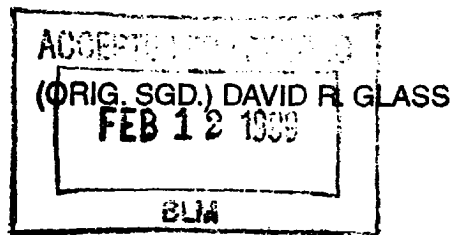
<p>1. TYPE OF WELL <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other</p> <p>2. NAME OF OPERATOR Nearburg Producing Company</p> <p>3. ADDRESS AND TELEPHONE NO. 3300 N. "A" Street, Bldg. 2, Suite 120 Midland TX 79705 915/686-8235</p> <p>4. LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description) SHL 1977' FNL & 998' FWL, Section 13, T22S, R24E BHL 850' FNL & 1650' FWL, Section 13, T22S, R24E</p>	<p style="text-align: center;">FORM APPROVED</p> <p>Budget Bureau No. 1004-0135</p> <p>Expires: March 31, 1993</p> <p>5. LEASE DESIGNATION AND SERIAL NO. NMNM12828</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. If Unit or CA, Agreement Designation</p> <p>8. Well Name and No. US 13 Federal #1-Y</p> <p>9. API Well No. 30-015-24193</p> <p>10. Field and Pool, or Exploratory Area Undesignated - Cisco/Canyon</p> <p>11. County or parish, State Eddy Co., New Mexico</p>
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12 CHECK THE APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion To Injection
	<input checked="" type="checkbox"/> Other: Temporary Abandonment	<input type="checkbox"/> Dispose Water

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.)

Drld to 8,240'. LDDP and DC's. Mix and pump 50 sx cmt plug @ 1,570'. WOC 3 hrs. TIH to tag plug - did not find. Mix & pump 2nd 50 sx cmt plug @ 1,570'. PUH 6 stds and WOC. TIH to cement plug @ 1,570'. TOH LDDP. ND BOPE. Install blind flange. Released rig. Well TA'd.



14. I hereby certify the foregoing is true and correct

SIGNED

TITLE Manager of Drig and Prod.

DATE

1/20/99

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE