

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artosia, NM 88210

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

Submit in triplicate
Other instructions on reverse side
Drawer DD

5. LEASE DESIGNATION AND SERIAL NO

LC 068127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

England Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Linda San Andres

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

S29 T6S, R26E

12. COUNTY OR PARISH 13. STATE

Chaves

NM

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 GAS WELL OTHER

2. NAME OF OPERATOR
Brady W. Production, Inc.

3. ADDRESS OF OPERATOR
P. O. Box 9128, Midland, Texas 79708

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
Tank Battery in S29 T6S R26E
660/S & 1980/W

AUG 31 '90

14. PERMIT NO.

N/A

15. ELEVATIONS (Show whether DF, RT, GR, etc.) C. D.

3665' GL

ARTESIA, OFFICE

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 PLANE

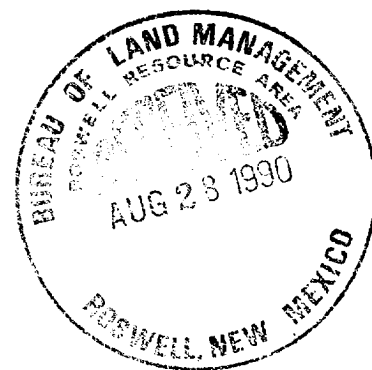
SUBSEQUENT REPORT OF:

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.)

Request approval of plan for disposal of produced water for this lease. Produced water is transported and disposed of by Jim's Water Service- Artesia Terminal.



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

SIGNED Michael Brady
(This space for Federal or State office use)

TITLE Vice-President

DATE 8-27-90

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED
DATE _____
PETER W. CHRISTIE

AUG 29 1990

*See Instructions on Reverse Side