

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
to the Office of the Director
Bureau of Land Management
Washington, D.C. 20250

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		AUG 05 '88		5. LEASE DESIGNATION AND SERIAL NO. LC 067811	
2. NAME OF OPERATOR Stevens Operating Corporation ✓		O. C. D. ARTESIA, OFFICE		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
3. ADDRESS OF OPERATOR P.O. Box 2408, Roswell N.M. 88201				7. UNIT AGREEMENT NAME N/A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL, 660' FEL, Sec. 33, T-7-S, R-26-E				8. FARM OR LEASE NAME Nichols Dale Fed	
				9. WELL NO. 7	
				10. FIELD AND POOL, OR WILDCAT Pecos Slope Abo	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33, T-7-S, R-26-E	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3742.9 GR		12. COUNTY OR PARISH Chaves	
				13. STATE N.M.	

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

X

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.)*

Propose to install 2 3/8" 7000 lbs. Burst surface gas flowline from Nichols Dale Federal #7 to connection point on Comanche Pipeline right of way. The flowline would run from well site in a south easterly direction for 1460' to connection point.



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

SIGNED Bob Farmer TITLE Production Foreman DATE 7-20-88

(This space for Federal or State office use)

APPROVED BY /s/ Phil Kirk TITLE Area Manager DATE 8-3-88

CONDITIONS OF APPROVAL, IF ANY:

Conditions of approval, if any:
This authorization is subject to the condition that all or part might be converted to a right-of-way grant in the future. Attached are pages 2-4 instructions on Reverse Side stipulations which also apply.

