

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

- 5. LEASE DESIGNATION AND SERIAL NO.  
NM 31633
- 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
- 7. UNIT AGREEMENT NAME
- 8. FARM OR LEASE NAME  
Pozna Federal
- 9. WELL NO.  
1
- 10. FIELD AND POOL OR WILDCAT  
~~Unit~~ Pecos Slope Abo, ~~West~~
- 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Unit I, Sec. 30-T5S-R24E
- 12. COUNTY OR PARISH 13. STATE  
Chaves NM

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(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.)

FEB 17 '88

- 1. OIL WELL  GAS WELL  OTHER
- 2. NAME OF OPERATOR  
Abo Petroleum Corporation ✓
- 3. ADDRESS OF OPERATOR  
105 South 4th St., Artesia, NM 88210  
O. C. D. ARTESIA, OFFICE
- 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface  
1980' FSL & 660' FEL
- 14. PERMIT NO.  
API #30-005-62585
- 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
4123.5' GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input checked="" type="checkbox"/>
FRACURE TREAT	<input type="checkbox"/>	FRACURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		
CHANGE PLANS	<input type="checkbox"/>		

(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.)\*

2-4-88. Ran 32 joints 9-5/8" 36# J-55 casing set 1302'. Texas Pattern Notched guide shoe set 1302'. Insert float set 1261'. Cemented w/875 sx Pacsetter Lite with 10#/sx Hiseal + 1/2#/sx Celloseal + 3% CaCl2 (yield 1.95, weight 12.8). Tailed in w/200 sx Class C with 2% CaCl2 (yield 1.32, weight 14.8). PD 10:30 PM 2-4-88. Bumped plug to 500 psi, released pressure and float held OK. Circulated 103 sx cement to surface. WOC. Drilled out 4:30 PM 2-5-88. WOC 18 hrs. NU and tested to 1000 psi for 30 mins, OK. Reduced hole to 7-7/8". Resumed drilling.



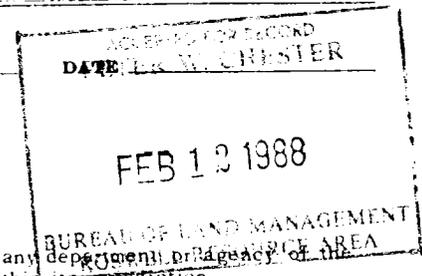
18. I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Production Supervisor

DATE 2-8-88

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:



\*See Instructions on Reverse Side