

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

Form approved.  
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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> P & A	7. UNIT AGREEMENT NAME Sulimar Queen Unit
2. NAME OF OPERATOR Tech Oilfield Research Corporation	8. FARM OR LEASE NAME Tract I
3. ADDRESS OF OPERATOR P.O. Drawer 730, Roswell, N.M. 88202	9. WELL NO. 8
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2310' FWL & 330' FSL	10. FIELD AND POOL, OR WILDCAT Sulimar Queen
14. PERMIT NO.	11. SEC. T. R. M., OR BLK. AND SURVEY OR ARMA Sec. 13-T15S-R29E
15. ELEVATIONS (Show whether DF, RT, or GL) 3938' GL	12. COUNTY OR PARISH Chaves
	13. STATE NM

RECEIVED  
JUL 17 1992  
O. C. D.  
OFFICE

16. 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 COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<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"/>		<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.)

8 5/8 = 411"  
Tbg. = 2 3/8 EVE  
Perfs = 1984'-1996'

Csg. = 5 1/2 14#  
Top of Salt = 460'  
Bottom of Salt = 1056

. Propose to P&A well as follows:

1. 1st plug 2010' to 1880' - 35 sx - Tag top of cmt.
2. Perf. csg. at 1000'
3. 2nd plug 1100' to 900' - 35 sx
4. Perf. csg. at 460'
5. 3rd plug 500' to 300' - 35 sx - Tag cmt.
6. 4th plug 60' to surface - 20 sx

Heavy mud will be used between all plugs.

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

SIGNED [Signature]

TITLE Agent

DATE 7-8-92

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

\*See Instructions on Reverse Side

