

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N. M. Oil Cons. Division
811 S. 1ST ST.
ARTESIA, NM 88210-2834

FORM APPROVED
BUDGET BUREAU NO. 1004-0135
EXPIRES: MARCH 31, 1993
5. Lease Designation and Serial No.

ckf

SUNDRY NOTICES AND REPORTS ON WELLS

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

Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well		7. If Unit or CA, Agreement Designation	
<input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		SULIMAR QUEEN UNIT	
2. Name of Operator		8. Well Name and No.	
TECH OILFIELD RESEARCH CORPORATION		TRACT 1-16	
3. Address and Telephone No		9. API Well No.	
P.O. Box 2885 Roswell, New Mexico 88202 505-624-2800		30-005-04745-62790	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		10. Field and Pool, or Exploratory Area	
585' FNL & 2570' FWL SEC. 24-T15S-R29E		SULIMAR QUEEN	
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		11. County or Parish, State	
		CHAVES, NEW MEXICO	

TYPE OF SUBMISSION		TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans	
<input 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 type="checkbox"/> OTHER	<input type="checkbox"/> Dispose Water	

Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.

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.)

PREP TO CONDUCT TRACER/WETTABILITY TEST AS FOLLOWS:

1. EQUIP WELL WITH PACKER SET @ +/- 1950'
2. FILTER 60 BBLS. PRODUCED OIL W/ 1 MICRON FILTER.
3. PUMP 10 BBLS. OIL SPACER TO DISPLACE WELLBORE FLUID.
4. MIX TRACER MATERIAL IN CRUDE OIL.
5. PUMP 40 BBLS. TRACER OIL @ .2 GAL./MIN. MAX. PRESSURE 500 PSI.
6. DISPLACE WITH 10 BBLS. CRUDE OIL.
7. RUN RODS & PUMP, PUT WELL ON PRODUCTION.
8. CATCH SAMPLES EVERY TWO HOURS FOR 6 DAYS, TWICE DAILY FOR 4 DAYS, DAILY FOR 20 DAYS AND WEEKLY THEREAFTER.

TEST TO START ON JULY 1, 1996

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

Signed: PB A. Stotter Title: AGENT Date: 6-17-96

(This space for Federal or State use)

Approved by: _____ Title: _____ Date: _____

Conditions of approval, if any:

APPROVED
PETER W. CHESTER
JUN 20 1996
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

Title 18 U.S.C. Section 1001, makes it a crime for any person to knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.