

UNIT STATES NM Oil Cons. OF COPIES REQUIRED
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

95P
BHM Roswell District
Modified Form No.
NM60-3160-4

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.)

RECEIVED
SEP 20 1990
ARRESA-DENGE

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 37604	
2. NAME OF OPERATOR ABO PETROLEUM CORPORATION		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 105 South 4th St., Artesia, NM 88210		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650' FSL, 330' FWL, Sec. 10-15S-29E		8. FARM OR LEASE NAME Boomer Federal	
14. PERMIT NO. 30-005-62793		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3868' GR		10. FIELD AND POOL, OR WILDCAT Und. Lucky Lake Queen	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA Unit L, sec. 10-T15S-R29E	
		12. COUNTY OR PARISH Chaves	
		13. STATE NM	

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 ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

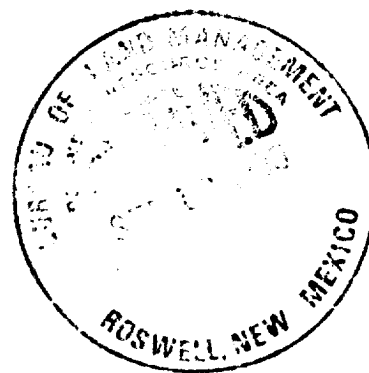
REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

1st production ☒

(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.) *

REPORT FIRST OIL PRODUCTION 9-3-90 INTO FRAC TANK.



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

SIGNED [Signature]
(This space for Federal or State office use)

TITLE Production Supvr.

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE 9-7-90
PETER A. CROFT
CROFT

DATE SEP 19 1990

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side