

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

FORM APPROVED  
OMB NO. 1004-0135  
Expires: September 30, 1990

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"/>		5. LEASE DESIGNATION AND SERIAL NO. LC 029424	
2. NAME OF OPERATOR Petrus Oil Company, L. P.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 12377 Merit Drive, Dallas, Texas 75251		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations. See also space 17 below.) At surface 660' FNL, and 1980' FWL		8. FARM OR LEASE NAME Bright Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3826'		10. FIELD AND POOL, OR WILDCAT	
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 24, T16S, R30E	
		12. COUNTY OR PARISH Eddy	13. STATE New Mexico

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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Re-Completion <input checked="" type="checkbox"/>	
(Other) <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.) \*

Set CIBP @ 3250', spot 10' cement on the bridge plug. Tested 9-5/8" casing to 1000 psi w/o pressure loss. Perforated Lovington sand 3094'-3098' w/4 SPF and 3110' to 3124' w/4 SPF. Acidized with 2000 gal. 15% NEFE HCL. Swab well back with 3% oil cut and trace of gas. Set temporary bridge plug @ 3055'. Perforated Grayburg Sand 2943'-2945', 2965'-2966', 3001.5'-3002.5, 3007'-3015' all w/4 SPF. Acidized with 2000 gals. 15% NEFE HCL. Swab well back with trace oil and light gas blow. Pulled temporary bridge plug and waiting on fracture treatment.

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

SIGNED Don McLaughlin TITLE Regulatory Analyst DATE January 22, 1990

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side