

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT 1  
(Other ins.  
verse side)

REPLICATE\*  
(ions on re

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"/>	7. UNIT AGREEMENT NAME West Square Lake Unit
2. NAME OF OPERATOR J. Cleo Thompson	8. FARM OR LEASE NAME Tract 13
3. ADDRESS OF OPERATOR Box 237 Loco Hills N.M. 88255	9. WELL NO. 4
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT Grbg San Andres
14. PERMIT NO. N/A	11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA 0-34-16 S-30 E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3744' GLM	12. COUNTY OR PARISH Eddy
	13. STATE N.M.

RECEIVED

O. C. D.  
ARTESIA, OFFICE

660 FSL & 1980 FEL of sec. 34

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 ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
ABANDON\* ☐  
CHANGE PLANE ☐

(Other) T.A. status

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐  
FRACTURE TREATMENT ☐  
SHOOTING OR ACIDIZING ☐  
REPAIRING WELL ☐  
ALTERING CASING ☐  
ABANDONMENT\* ☐

(Other) (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.)

We request Permission to leave well in T.A. status. For observation of the possibility of water injection in the future.  
5 1/2 Csg. set @ 2828'  
C.I.B.P. set @ 2818' W/30' Cmt. on top  
Csg. was tested to 350 Lbs. on 3-16-88.  
Hole was then circulated with inhibited fluid, and capped off.  
Witnessed by Mike Williams O.C.D. 3-16-88

APPROVED FOR 12 MONTH PERIOD  
ENDING 08-01-90

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

SIGNED *[Signature]*

TITLE Production Foreman

DATE 7-14-89

(This space for Federal or State office use)

APPROVED BY *[Signature]*  
CONDITIONS OF APPROVAL, IF ANY:

FOR *[Signature]*  
TITLE

DATE 8-4-89

\*See Instructions on Reverse Side