

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT 1
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-013
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"/>	RECEIVED JUL -18- 1992 O. C. D. ARTESIA OFFICE	5. LEASE DESIGNATION AND SERIAL NO. 063926
2. NAME OF OPERATOR J. Cleo Thompson		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 237 Loco Hills N.M. 88255		7. UNIT AGREEMENT NAME West Square Lake Un.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL 1980' FWL of Sec. 35		8. FARM OR LEASE NAME Tract 5
		9. WELL NO. 8
		10. FIELD AND POOL OR WILDCAT GVBG San Andres F.
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA F-35-16 S R 30 E
14. PERMIT NO. N/A	15. ELEVATIONS (Show whether OF, RT, GR, etc.) 3779' GLM.	12. COUNTY OR PARISH Eddy
		13. STATE N.M.

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)

T.A.

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*

(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 keep well under T.A. Status.
Csg. was tested to 500 Lbs. on 5-1989.
Johnny Robinson W/O.C.D. was there to witness the test.
We will evaluate this well for the next year, to determine
if we will reinstate on P. & A.

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

SIGNED

Amich P. 6/21

TITLE Production Foreman

DATE 7-14-89

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side