

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**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

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

General Atlantic Resources, Inc.

3. Address and Telephone No.

410 17th Street, Suite 1400, Denver, CO 80202

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2130' FSL & 1800' FWL  
Sec. 12-T16S-R27E

5. Lease Designation and Serial No.

NM 7066

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Williamson Federal #2

9. API Well No.

10. Field and Pool, or Exploratory Area

Diamond Mound, Morrow

11. County or Parish, State

Eddy County, New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☒ Recompletion  
☒ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ 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.)\*

Pull tubing and packer out of hole. Set CIBP above existing Morrow perforations and set 35' cement on CIBP with dump bailer. Perforate Wolfcamp zone from 6985'-6991' with casing gun. Run 2-3/8" tubing and packer in hole. Set packer at 6900'. Stimulate Wolfcamp as required with acid. Flow test well through existing production facilities.

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

Signed Robert D. Maury  
(This space for Federal or State office use)

Title Sr. Operations Engineer

Date 3/25/93

Approved by [Signature]  
Conditions of approval, if any:

Title [Signature]

Date 4/23/97