

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

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

ckf

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> Re-entry	5. LEASE DESIGNATION AND SERIAL NO. NM-15868
2. NAME OF OPERATOR MWJ PRODUCING COMPANY ✓	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 1804 First National Bank Bldg Midland, Texas 79701	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 & 2310' FWL	8. FARM OR LEASE NAME Rutter Federal Com
14. PERMIT NO.	9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3582' GL	10. FIELD AND POOL, OR WILDCAT Red Lake (Q, GB, SA)
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 25, T-17S, R-27E
	12. COUNTY OR PARISH Eddy
	13. STATE New Mexico

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

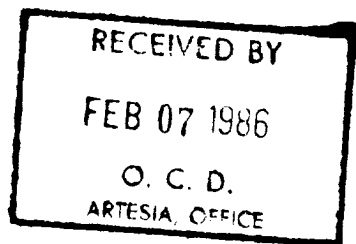
SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(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.)

1/2/86: Swabbed tbg dry. RY Halliburton & set plug on btm. Lowered tbg to 1200'.  
Loaded hole w/62 BFW. Circ'd 18 bbls. Mixed 60 sx cmt & displaced w/6 BW.  
Pulled 30 jts tbg & SD ON.  
1/3/86: Ran 24 jts tbg & tagged cmt @ 1165'. LD tbg. Cmt'd at surface w/15 sx cmt.  
Released Unit. RD. Cut off 8-5/8" csg & welded on dry hole marker. Well  
Plugged and Abandoned. NOTE: Witnessed by representative of BLM.



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

SIGNED Pat Drexler

TITLE Pat Drexler - Agent

DATE 1/10/86

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 2-6-86

\*See Instructions on Reverse Side