

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS. COMMISSION

Drilling and Tripling
(Other instructions on re-
lease) NM 88210 re-

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

458

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. NM 15001	
2. NAME OF OPERATOR MWJ PRODUCING COMPANY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 400 W Illinois, Ste 1100, Midland, TX 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 Unit Letter C, 467' FNL & 2310' FWL		8. FARM OR LEASE NAME Roper Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3538' GL		10. FIELD AND POOL, OR WILDCAT Empire Y-SR	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 25, T-17-S, R-27-E	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

RECEIVED
JUN 18 1993
C. C. D.

18. 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 COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <input 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.)*

Plugging instructions per Adam, BLM Carlsbad, 5/4/93:

1. Set CIBP @ 400' w/ 50' cement on top.
2. Fill wellbore w/ 9-1/2# mud.
3. Set 50' cement surface plug.
4. Install drv hole marker being at least 4" diameter, 10' long & 4' above restored ground level embedded in cement, capped & inscribed w/ well information.
5. Restore location.

Note: Must use Class C 2% CaCl mixed @ 14.8#/gal;
9-1/2# mud w/ 25# gel/bbl brine water.

RECEIVED
MAY 5 10 27 AM '93
C. C. D.

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

SIGNED <u>Collene Hall</u>	TITLE <u>Collene Hall, Agent</u>	DATE <u>5-4-93</u>
(This space for Federal or State office use)		
APPROVED BY <u>(ORIG. SGN) JOE G. LARA</u>	TITLE <u>PETROLEUM ENGINEER</u>	DATE <u>5-4-93</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side