

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Millard Deck Estate

3. ADDRESS OF OPERATOR

P. O. Box 2546, Fort Worth, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface

660' FNL & 660' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3638.8 GL

5. LEASE DESIGNATION AND SERIAL NO.

NM-03361

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NA

7. UNIT AGREEMENT NAME

NA

8. FARM OR LEASE NAME

Federal 19

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

High Lonesome - 19

11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA

Sec. 19 T16S R29E

12. COUNTY OR PARISH

Eddy

13. STATE

N M

16.

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)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Well Completion

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.)\*

9/8/85 Spudded well. Sat 8 5/8" Casing @ 355'. Set 4 1/2" casing @ 1874'

9/17/85 Perf 4 1/2" casing from 1746' to 1772' w/4 holes/foot.

9/18/85 Fraced with 109,000# sand in Gelleo Salt Water.

9/20/85 Install pumping Equipment.

9/30/85 Pumping Test (24Hrs.): 30 BOD 30 BWD (Load)

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

SIGNED

Ed DiRe

TITLE Petroleum Engineer

DATE 9/30/85

(This space for Federal or State office use)

APPROVED BY

ACCEPTED FOR RECORD

TITLE

DATE

CONDITIONS OF APPROVAL IF ANY:

OCT 4 1985

\*See Instructions on Reverse Side