

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
NM OIL CONSERVATION  
SUBMIT IN TRIPL  
Drawings (Other instructions  
verse side)  
Artesia, NM 88210

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

5. LEASE DESIGNATION AND SERIAL NO.

NM 26072

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Exxon Federal

WELL NO.

6

9. FIELD AND POOL, OR WILDCAT

High Lonesome (Queen)

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

Sec. 18, T. 17S, R. 29E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

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 ☒ GAS ☐  
WELL ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

Beach Exploration, Inc.

3. ADDRESS OF OPERATOR

500 N. Marienfeld Suite 200 Midland, Texas 79701 O. C. D.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below.)

At surface

560' FSL & 2035' FSL

(Unit N)

(SE/4 SW/4)

14. PERMIT NO.

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

3655.5 GL

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) Casing Report

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.) \*

11-19-86 Spud 9:15 AM, 12 1/4" Hole, drld. to 312', set 8 5/8" casing to 307',  
cemented with 250 Sxs Cl C + 2% Ca Cl. PD 3:30 PM 11-19-86

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

SIGNED

TITLE Barbara Watson

DATE 11-20-86

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY (ORIG. SGD.) DAVID R. GLASS

TITLE

DATE

CONDITIONS OF APPROVAL DE 00-6-1986

CARLSBAD, NEW MEXICO See Instructions on Reverse Side

