

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0117  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-11327

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Henshaw Federal

9. WELL NO.

1

10. FIELD AND POOL OR WILDCAT

Wildcat-Devonian

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

Sec. 14, T16S, R30E

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 WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Petrus Oil Company, L. P.

3. ADDRESS OF OPERATOR

12201 Merit Drive, Suite 900 Dallas, Texas

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

330' FSL & 1750' FWL, SE/4 SW/4, Unit Letter N

14. PERMIT NO.

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

3821' GR

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)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

Casing Details

(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.)\*

Spud well at 6:00 pm, 06-12-87. 06-13-87, ran 18 jts of 13-3/8" casing & set at 504'. Cemented w/50 sx Class C w/4% CaCl and 50 sx Class C w/4% CaCl w/100' fill. Set final slurry w/255 sx Class C w/4% CaCl. Circulated 55 sx cement to surface. NU BOP's and test same. Okay.

ACCEPTED FOR RECORD

AUG 13 1987

SJS

CARLSBAD, NEW MEXICO

DUPLICATE COPY

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

SIGNED Suzann Jourdan

TITLE Regulatory Coordinator

DATE 06-16-87

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side