

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
BUDGET BUREAU NO. 1004-0135  
EXPIRES AUGUST 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-77042

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☐

FEB 6 9 37 AM '89

UNIT AGREEMENT NAME

2. NAME OF OPERATOR  
BILL FENN, INC. ✓

CARLS AREA

8. FARM OR LEASE NAME

GRANDVIEW FEDERAL

3. ADDRESS OF OPERATOR  
P. O. DRAWER 569, GIDDINGS, TEXAS 78942

RECEIVED

9. WELL NO.

1

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

1980' FNL & 1980' FEL

FEB 10 '89

10. HOLE AND POOL, OR WILDCAT

SQUARE LAKE

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

Sec. 20-T16S-31E

14. PERMIT NO.

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

3969.3

3961.3

ARTESIA, OFFICE

12. COUNTY OR PARISH

EDDY

13. STATE

NEW MEXICO

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANE

(Other)

(Other) COMPLETE NEW ZONE

(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.)

LOWER ZONES WERE NOT PRODUCTIVE. SET CIBP AT 3100'. DUMP BAIL 35' CEMENT ON TOP OF PLUG. PERF 2950 - 2964 WITH 4" CSG. GUN 1 SPF.

TREAT WITH 1000 GALS. 15% NEFE HCL.

FRAC WITH 19,000 GALS, 65 QUALITY N<sub>2</sub> FOAM WITH 23,000# 12/20 SAND.

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

SIGNED

*Danny Brown*

TITLE OPERATIONS MANAGER

DATE 1/23/89

(This space for Federal or State office use)

APPROVED BY

CRIC 330 BALCIB

TITLE

DATE

2-9-89

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side