

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Dry Hole	5. Lease Designation and Serial No. NM 93469
2. Name of Operator Collins & Ware, Inc.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 508 W. Wall, Suite 1200, Midland, Texas 79701 (915) 687-3435	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) UL D, 660 FNL, 660 FWL, Sec 23, T-16S, R-27E	8. Well Name and No. C V "23" Federal #2
	9. API Well No. 30-015-28674
	10. Field and Pool, or Exploratory Area Dog Canyon (Grayburg)
	11. County or Parish, State Eddy County, New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

11/03/95 Received plugging instructions.

Plug #1 1500-1390 40 sx class "C"
Plug #2 418- 318 35 sx class "C"
Plug #3 50-Surf 18 sx class "C"

Tagged

Released rig @ 10:00 pm 11/03/95

RECEIVED

DEC 08 1995

OIL CON. DIV.
DIST. 2

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

Signed

Title

Dianne Sumrall
Production Clerk

Date

11/16/95

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: