

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Budget Bureau No. 1004-013
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC 028992-A

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.)

RECEIVED

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

APR 1 1991

2. NAME OF OPERATOR

Herman J. Ledbetter

3. ADDRESS OF OPERATOR

P.O. Box 5879 Abilene, TX 79608 (915)692-0671

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

330' FSL & 330' FWL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "B"

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Fren Seven Rivers

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

23-175-30E

14. PERMIT NO.

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

12. COUNTY OR PARISH

13. STATE

Eddy

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Test Casing

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

1. Set a cast iron bridge plug at 1850 feet and dump a 35' cement plug on top of bridge plug with bailer.
2. Load well with water treated with inhibitor and test casing to 500 pounds per square inch.

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

SIGNED

TITLE

operator

DATE

3/22/91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

3/29/91

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side