

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

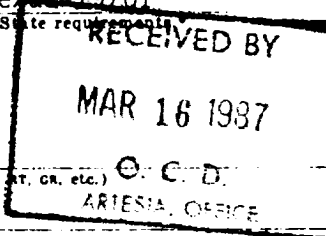
Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

CKP

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Boyd & McWilliams Corporation	8. FARM OR LEASE NAME Empire Federal
3. ADDRESS OF OPERATOR 704 Western United Life Bldg., Midland, Texas 79701	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 710' FNL & 1503' FWL of Section 6	10. FIELD AND POOL, OR WILDCAT Grbg. Jackson (SR, Qn, Grbg, SA)
14. PERMIT NO. 30-015-25725	11. SEC., T., R., S., OR BLK. AND SURVEY OR AREA Sec. 6, T17S, R29E
15. ELEVATIONS (Show whether DF, ST, GR, etc.) 3718' Gr.	12. COUNTY OR PARISH Eddy
	13. STATE N.M.



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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/> Drilling activity	
(Other) <input type="checkbox"/>			

(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.) *

- 2/28/87 - Reached T.D. of 2478'. Running logs.
- 2/29/87 - Ran Dual Laterlog/Micro-SFL; Compensated Neutron/Litho Density; Natural Gamma Ray Spectrometry; Long Spacing Sonic/Wave Form Digitizing & Electromagnetic Propagation Tool logs.
- 3/1/87 - T.D. 2478'. Ran 60 jts. of 5½" 15.5 & 14.5# J-55 casing. Set casing at 2478' and cemented w/600 sx. Halco lite w/8# salt, 1/4# flocele & 250 sx. 50/50 w/6# salt and .2 of 1% CFR-3. Circulated 15 sx. Plug down at 4:30 p.m., 3/1/87.
- 3/2-3/9 - Shut down, waiting on evaluation of logs.

ACCEPTED FOR RECORD

MAR 12 1987

For
CARLSBAD, NEW MEXICO

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

SIGNED <i>David Goodrum</i>	TITLE Agent	DATE 3/9/87
David Goodrum dba Goodrum Oil & Gas Production Acctg. 915/682-8314		
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side