

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  
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator  
**SHIFFLETT OPERATING COMPANY**

3. Address and Telephone No.  
**214 WEST TEXAS AVENUE, SUITE 900; MIDLAND, TEXAS 79701 (915) 6822 7861**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**660 FSL & 1980 FWL, SEC 28, T18S, R29E**

5. Lease Designation and Serial No.

**SBM 1406**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

**SZM 1406**

8. Well Name and No.

**TRIGG JENNINGS COM #1**

9. API Well No.

**30 015 22784**

10. Field and Pool, or Exploratory Area

**N TURKEY TRACK MORROW**

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 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 checked="" type="checkbox"/> Other LOWER TUBING	<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.)\*

7/20/98 MIRU PRO WIRELINE FISH PLUNGER, BUMPER SPRING, RUN PRESSURE BOMB, TD@11044', SET PLUG IN PROFILE, TEST TUBING, TEST CASING.

7/21/98 MIRU POOL WELL SERVICE, STRIP OFF HEAD, RELEASE ON OFF TOOL, SWAB 112 BBLS.

7/22/98 SWAB BACK 53 BBLS

7/23/98 GET ON ON/OFF TOOL PULL PLUG RELEASE PACKER ADD ON JOINT. LEFT PACKER SWINGING.

7/24/98 SWAB 18 BBLS

7/27/98 MAKE 4 SWAB RUNS RDMO POOL

8/3/98 MIRU POOL SWAB UNIT SWAB 6 BBLS

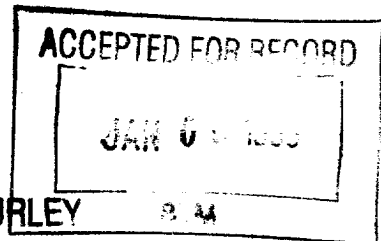
8/4/98 RDMO POOL WELL SERVICE. MIRU L&R WELL SERVICE.

8/5/98 STRIP OFF HEAD STIP ON BOP. POOH W TUBING AND PACKER. LAY TUBING, S.N. @ 10960. STRIP OFF BOP STRIP ON BOP. SION

8/5/98 T.P. 360 C.P. 240 3 SWAB RUNS 4 BBLS RDMO L & R

8/6/98 T.P. 350 C.P. 340 TRIPPED PLUNGER TURN WELL OVER TO PUMPER.

DOWN PACKER. TIH W 354 JOINTS



(ORIG. SGD.) GARY GOURLEY

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

Signed \_\_\_\_\_ Title **PRESIDENT**

Date **12/14/98**

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_ Date \_\_\_\_\_

RECEIVED  
FBI  
FEB 16 1998