

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other Instructions
Use also COMMISSION
Drawers DD
Artesia, NM 88210

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

ckf

5. LEASE DESIGNATION AND SERIAL NO.

LC 067348

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Dixon Yates LM Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Turkey Track Atoka

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

Unit G, Sec. 28-T18S-R29E

14. PERMIT NO.

API #30-015-23272

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

3438' GL - 3451' KB

12. COUNTY OR PARISH

Eddy

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Perforate additional

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

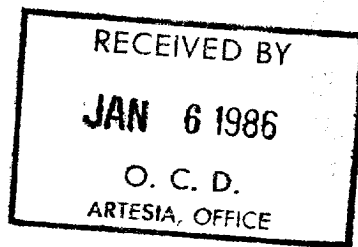
ALTERING CASING

ABANDONMENT*

(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.)*

Propose to perforate additional perfs at 10480-11026', will treat and commingle with present perforations.



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

SIGNED

TITLE Production Supervisor

DATE 1-2-86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side