Foria 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS o 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	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on We Completion or Recompletion Report and Log form
SUBMIT IN TRIPLICATE Type of Well	8. Well Name and No. Holly 8 Federal #1 9. API Well No. 30-015-24298 10. Field and Pool, or exploratory Area Sand Tank (Strawn)-Pro 11. County or Parish, State Eddy NM ORT, OR OTHER DATA FION Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on We Completion or Recompletion Report and Log form
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Burlington Resources 0il & Gas Company Address and Telephone No. P.O. Box 51810 Midland, Texas 79710-1810 915-688-9012 Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FNL & 1980' FEL Sec. 8, T18S, R30E CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPO TYPE OF SUBMISSION TYPE OF ACTI Notice of Intent X Recompletion Plugging Back Casing Repair Altering Casing Other Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*	30-015-24298 10. Field and Pool, or exploratory Area Sand Tank (Strawn)-Pro 11. County or Parish, State Eddy NM ORT, OR OTHER DATA Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on We Completion or Recompletion Report and Log form
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We are unable to run a C122 4-pt. test due to the low volume of gas produced pressure up to allow the test to run. We are requesting an allowable based	d by this well. Well will not on the 9/24/97 test.
4. I hereby certify that the foregoing is true and correct Signed Title Regulatory Assistant (This space for Federal or State office use) Approved by	Date 10/15/97