

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. LEASE DESIGNATION AND SERIAL NO.

LC 055696

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Boulter Federal

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

Turkey Track 7Rvs-Qn-GB-SA

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

S22-T18S-R29E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

MYCO Industries, Inc.

3. ADDRESS OF OPERATOR

207 S. 4th Street Artesia, NM 88210

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

660' FSL & 660' FEL
S22-T18S-R29E

14. PERMIT NO.

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

RECEIVED BY

SEP - 5 1986

O. C. D.

ARTESIA, OFFICE

16.

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)

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*

Change Operator

(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.)

Effective 9-1-86, the above captioned well will be operated by MYCO Industries, Inc. instead of Martin Yates III who has been the operator of the well since it was spudded.

Please note the attached NMOC Form C-104 which denotes the change in operator as of 9-1-86.

MYCO has both N.M. State & Federal plugging bonds on file with the N.M.O.C.D.

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

SIGNED

TITLE Engineer

DATE 9-1-86

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED FOR RECORD

DATE

SEP 04 1986

*See Instructions on Reverse Side