Submit 3 Copies to Appropriate

Energy,

State of New Mexico rals and Natural Resources Department

District Office	$\mathcal{H}\mathcal{V}$	
DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240  OIL CONSERVATIO P.O. Box 208	30-015-29375	
DISTRICT II Santa Fe, New Mexico P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease  STATE X FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No. 6009	
SUNDRY NOTICES AND REPORTS ON WEI	LS ////////////////////////////////////	
( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN DIFFERENT RESERVOIR. USE "APPLICATION FOR PE (FORM C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name	
1. Type of Well: OB. GAS WELL X OTHER		
2. Name of Operator	8. Well No.	
V-F Petroleum Inc.	9. Pool name or Wildcat	
3. Address of Operator	}	
P.O. Box 1889 , MIDLAND, TEXAS 79702	NORTH TURKEY TRACK; MORROW	
	Line and 1650 Feet From The FAST Line	
Unit Letter U: 660 Feet From The SOUTH		
Section 34 Township 185 Ru 10. Elevation (Show whether 3,524 GR	mge 28E NMPM EDDY County DF, RKB, RT, GR, etc.)	
Check Appropriate Box to Indicate	Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:	
NOTICE OF INTENTION TO.		
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB	
OTHER: ADD PERFORATIONS IN MORROW X	OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, an work) SEE RULE 1103.	id give pertinent dates, including estimated date of starting any proposed	
1.) MOVE IN & RIG UP WORK OVER RIG.		
2.) INSTALL BOP.	,	
3.) TOH WITH ALL EXISTING PRODUCTION EQUIPME	NT •	
4.) SET BP @ 10,920!.	1011/2/2	
	& BOP TO 1,500# PSI.	
6.) TIH WITH TCP & PACKER.	0,848' - 70' FLANGE WELL UP.	
7.) SET PACKER WITH TCP GUNS OVER INTERVAL 1	0,848' - 70' FLANGE WELL OF.	

- 9.) PERFORATE MORROW ZONE 10,848-70 WITH 4 JSPT. FLOW TO TEST.



		CS52627			
I hereby certify that the information above is tree and complete to the best of my knowledge and belief.					
SIGNATURE J	Tura		PRODUCTION SUPERINTENDENT	_ DATE12/07/00	
TYPE OR PRINT NAME M. WA	YNE LUNA			TELEPHONE NO. (915)	<u>683-</u> 3344
(This space for State Use)		RIGINAL SIGNED BY TI ISTRICT II SUPERVISOR		_ DATE FEB 262	
APTROVED BY		TITLE -		- DAIL T- BO	