SUNDRY NOTICES AND REPORTS ON WELLS  (Do not use this form for proposals, to defile to develop or pige back to a different reservoir.    Comparison	rm approved. dget Bureau No. 1004-0135 pires August 31, 1985 DESIGNATION AND SERIAL NO025559
OTHER  OTHER  NAME OF OFERATOR  NAME OF OFERATOR  S. PARM  GLEN PLEMONS  GLEN PLEMONS  GLEN PLEMONS  GLEN PLEMONS  S. PARM  FEB 16 1987  FEB 16 1987	DIAN, ALLOTTEE OR TRIBE NAME
Glen Plemons  3. ADDRESS OF OFFICE PROOF OF SECTION OF SECTION OF MELL (Report location clearly and in accordance with the order requirements.  See an NWT of Sec 13 T19S R30E Unit Letter F  16.50 PNL & 1750 PWL  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Date Notice of Intention to:  TEST WATER SHOT-OFF PILL ARANDON CHANGE PLANT SHOOT OR ACIDIENT SHOOT OR AC	AGRECHENT NAME OR LEASE NAME
P. O. Box 965 Wolfforth, Texas 2003 OFFICE  1. Interpretation of the properties of the control of the properties of the control of the properties of the pro	deral 13
Set NW4 of Sec 13 T198 B30E Unit Letter F  1650 FNL & 1750 FWL  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Date  NOTICE OF INTERVION TO:  TEST WATER SHUT-OFF  PRACTER TREAT SHOOT OR ACIDED.  REPAIR WELL  (Other)  (Ot	D AND POOL, OR WILDCAT
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Date  Notice of Intention to:  Subsequent report  Fracture treat reat  Shoot to rectule treat  Change of Ceperator  (Other) Change of Ceperator  (Other) Change of Ceperator  To intention of Recompletia absolutes of Completion of Recompletion Report  To intention the months of Completion and Districtionally drilled, give subsurface headings and time vertical depths for next to this work.)*  18. I bereby certify that the foregoins is rive and correct	on Yates East T., R., M., OR BLE. AND BYET OR AREA T19S R30E NMPM
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Date  NOTICE OF INTENTION TO:  SUBBRQUENT REPORT  BULL OR ALTER CASING WATER SHUT-OFF  PRACTURE TREAT  NHOOT OR ACIUZA  REPARR WELL  (Other) Change of Operator  17. DESCRIBE PROPERTOR Well is directionally drilled, give subsurface locations and invasived and true vertical depths for nent to this work.)*  18. I hereby certify that the foregoins is rive and correct	TY OR PARISH 13. STATE
NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDED.  ABANDON* CHANGE PLANS (Other)  TO DINYRING PROPOSED OF COMPLETE OF RATIOS (Clearly state all perthent details, and green princed and true vertical depths for neat to this work.)*  NOTICE OF INTENTION TO:  BUBBEQUENT REPORT WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other)  (NOTE: Report results of multiple Completion or Recompletion Report Prince Treatment details, and green princed and true vertical depths for neat to this work.)*  WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other)  (NOTE: Report results of multiple Completion or Recompletion Report Prince Treatment SHOOTING OR ACIDIZING (Other)  (NOTE: Report results of multiple Completion or Recompletion Report Prince Treatment SHOOTING OR ACIDIZING (Other)  (NOTE: Report results of multiple Completion or Recompletion Report Prince Treatment SHOOTING OR ACIDIZING (Other)  (NOTE: Report results of multiple Completion or Recompletion Report Prince Treatment SHOOTING OR ACIDIZING (Other)  (NOTE: Report results of multiple Completion or Recompletion Report Prince Treatment Fracture T	New Mexico
PRACTURE TREAT SHOOT OR ACIDIZA REPAIR WELL (Other) Change of Operator  To discrete the proposed of completion of Recompletion Report proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths to nent to this work.)*  18. I hereby certify that the foregoing is true and correct	
18. I hereby certify that the foregoing is true and correct	ALTERING WELL  ALTERING CASING  ABANDONMENT®  E completion on Well  It and Log form
SIGNED TITLE Operator DATE	<sub>18</sub> 2-9-87
(This space for Federal or State office use)  Order of the Control	2-11.86

\*See Instructions on Reverse Side