

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
OIL & GAS COMMISSION

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Budget Bureau No. 1004-0155
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-014102

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐ APR 05 '89

2. NAME OF OPERATOR

Plemmons - Angel Oil Company O.C.D. / ARTESIA, OFFICE

3. ADDRESS OF OPERATOR

P.O. Box 965 Waltham TX 79382

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

NE 1/4 SE 1/4 Sec 20 Twp 18-S-RGE 31 E
2310/S 3301 E

14. PERMIT NO.

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

3637 DF

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

U. SHUGART QUEEN UT.

9. WELL NO.

8
SHUGART / SEC 20-9
North Shugart Farm

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

SEC 20 - Twp 18S - RGE 31 E

12. COUNTY OR PARISH

EDDY New Mexico

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

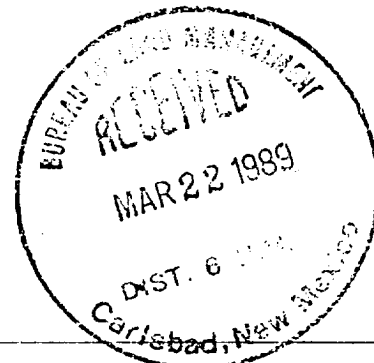
ALTERING CASING

ABANDONMENT*

(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.) *

Plan To Squeeze Queen formation. Test casing to see if it is ok. move cable tool rig on hole and clean out and re-perforate Queen and put back on production. Plan to start immediately



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

SIGNED

TITLE

Partner

DATE

3-19-89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

4-4-89

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side