

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

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

RECEIVED

OIL WELL ☒ GAS WELL ☐ OTHER ☐

1. NAME OF OPERATOR

Siete Oil and Gas Corporation ✓

FEB 02 '88

2. ADDRESS OF OPERATOR

P. O. Box 2523 Roswell, New Mexico 88202 O. C. D.

ARTESIA OFFICE

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

330' FNL & 2260' FEL

4. NAME, DESIGNATION AND SERIAL NO.

NM-025277

5. IF DESIGN. ALLOTTED OR OTHER NAME

6. SURF. ADJACENT LAND

7. NAME ON LEASE NAME

Keohane Federal

8. WELL NO.

1

9. FIELD AND POOL OR WILDCAT
Shugart-Y-7 Rvr-Q-C

10. SEC. T. R. M. OR BLS. AND
QUAD/ST OR AREA

Sec. 24: T18S R31E

11. COUNTY OR PARISH

Eddy

12. STATE

NM

13. PERMIT NO.

14. ELEVATIONS (Show whether DT, ST, OR, etc.)

3720' GR

15. 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)

WELL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

SUBSEQUENT REPORT ON:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Note: Report results of multiple completion or well completion or recompletion Report and Log form.)

16. 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.)

Siete Oil and Gas Corporation has intentions of plugging the subject well before the end of 1988.

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

SIGNED

TITLE Production/Reservoir Engineer DATE 1/26/88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE 2-1-88

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side