Form 3160-5
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

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

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS

(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.)

RECEIVED
OCT 20 '89
O. C. D.
ARTESIA, OFFICE

1. OIL WELL [X] GAS WELL [ ] OTHER

2. NAME OF OPERATOR
Sirgo Operating, Inc.

3. ADDRESS OF OPERATOR
P.O. Box 3531, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
Unit M, 330 FSL 834 FWL

5. LEASE DESIGNATION AND SERIAL NO.
LC-029387-D

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Kenwood Federal

8. FARM OR LEASE NAME

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
Shugart (Y.SR.Q.GR.)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 19, T18S, R31E

14. PERMIT NO.

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

12. COUNTY OR PARISH: Eddy
13. STATE: NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[ ]	REPAIRING WELL	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Test Downhole Equipment			[X]
(Other)				(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.)*

3-15-89 Ran Casing-Bradenhead test & witnessed. Tested to 350# - Held okay.

RECEIVED
OCT 17 '89
CARLSBAD, NEW MEXICO

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

SIGNED Bonnie Atwater TITLE Production Technician DATE 10-16-89

(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OCT 18 1989

CARLSBAD, NEW MEXICO

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any