

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL. TE
(Other instructions on re-
verse side)

25F
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	<div>RECEIVED BY JUN 29 1987 ARTERIAL OFFICE</div>	5. LEASE DESIGNATION AND SERIAL NO. NM-15291
2. NAME OF OPERATOR Nearburg Producing Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 31405 - Dallas, TX 75231		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL & 1980' FWL		8. FARM OR LEASE NAME IRAMI FEDERAL
		9. WELL NO. 1
		10. FIELD AND POOL, OR WILDCAT Seven Rivers - Yeso
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34-T19S-R25E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3527.1' GR	12. COUNTY OR PARISH EDDY
		13. STATE NEW MEXICO

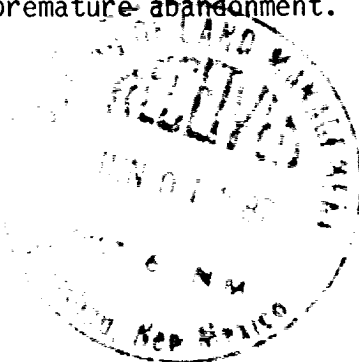
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) Shut Well In <input checked="" type="checkbox"/>		(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.)*

We are requesting an extension for the temporary suspension of production from the Irami Lease per 43 CFR 3103.4-2 for the maximum period of time the Irami Federal No. 1 Well may be shut in.

The Irami Lease is in its extended term. The primary term of the lease expired May 1, 1982. Only one well, the Irami Federal #1, NM-15291, is on this lease. This well is incapable of producing 10 BOPD, thereby its classification of stripper oil well is accepted by industry standards. The lease is capable of production in paying quantities under future anticipated economic scenarios but failure to suspend production at this time will lead to premature abandonment.



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

SIGNED <u>Kathleen A. Grant</u>	TITLE <u>Production Analyst</u>	DATE <u>5/29/87</u>
(This space for Federal or State office use)		
APPROVED BY <u>Edmund J. Serrano</u>	TITLE <u>ASST. MGR. BLM</u>	DATE <u>6-24-87</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side