C15F

N.M. Oil Cons. Division

Form 3160-5 (June 1990)

1. Type of Well

811 S. 1st Street DEPARTMENT OF THE INTERIOR Artesia, NM 88210-2834
BUREAU OF LAND MANAGEMENT

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993

7. If Unit or CA, Agreement Designation

| SUNDRY NOTICES AND REPORTS ON WELLS   |  |
|---|--|
| Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. |  |
| Use "APPLICATION FOR PERMIT—" for such proposals  |  |

SUBMIT IN TRIPLICATE

| 3. Address and Telephone No. 465 W. Wall #835 M.  4. Location of Well (Footage, Sec., T., R., M., of Survey I 1980 FEL.  Sec. 31 - T195-R28E | 2 07 08 04 04 04 04 04 04 04 04 04 04 04 04 04 | 30-015-22132  10. Field and Pool, or Exploratory Area Face Delaway  11. County or Parish, State  Edy Co., NM |
|--|--|--|
| 12. CHECK APPROPRIATE BOX  | (s) TO INDICATE NATURE OF NOTICE, REPOR        | RT, OR OTHER DATA  |
| TYPE OF SUBMISSION   | TYPE OF ACTION                                 |  |
| Notice of Intent   | Abandonment                                    | Change of Plans  |
| Subsequent Report  | Recompletion Plugging Back                     | New Construction  Non-Routine Fracturing   |
| Final Abandonment Notice   | Casing Repair Altering Casing Other            | Water Shut-Off Conversion to Injection Dispose Water   |
|  |  | (Note: Report results of multiple completion on Well   |

13. 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.)\*

Pull out of hole w/ tubing. Drill out cement retainer + cement from 6024'-6130', cement plug from 8500-8700'. Perforate the Wolfcamp 9047-52',9057-60',9074-77', and 9080-83' W1 ZJSPF. Stimulate as necessary. If commercial, cement 

|  |                  | NOV 5 1999                |
|--|------------------|---------------------------|
|  |                  | BUREAU OF LAND MANAGEMENT |
| 14. I hereby certify that the foregoing is true and correct Signed Signe | Tille Arca Engin | THE AREA                  |
| (This space for Federal or State office use)  Approved by Conditions of approval, if any:  | Title            | Date                      |