

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved
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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Read & Stevens, Inc.

3. ADDRESS OF OPERATOR

P.O. Box 1518, Roswell, NM 88202

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

600' FNL & 2100' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether of, to, or, etc.)

3724' GL

5. LEASE DESIGNATION AND SERIAL NO.

LC-047633(A)

6. IF ROLLER, ALLOTTEE OR TRIBE NAME

7. GRANT AGREEMENT NAME

8. FARM OR LEASE NAME

Marion Fed.

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Tamano Bone Springs

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

Sec 14-18S-31E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

RECEIVED

C. C. D.
ARTESIA, OFFICE

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)

PLUG OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) run: 8 5/8' csg.

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

X

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.)

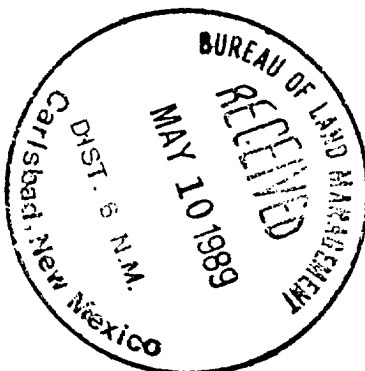
TD 11" intermediate hole @ 2408' Run 57 jts 8 5/8". 24# J csg to 2408'. Cmt w/1300 sx cmt. Circ 100 sx to surf. WOC 8 hrs NUBOPE and csg to 1000 psi, OK.

test

RECEIVED

Apr 27 12:03 PM '89

BUREAU OF LAND MGMT.
HCEBS, NM.



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

SIGNED

TITLE Petroleum Engineer

DATE 4-24-89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

MAY 1 1989

*See Instructions on Reverse Side

SJS
CARLSBAD, NEW MEXICO