

Form 3160-5
(July 1989)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVED
OFFICE FOR NEARBY
OF COPIES REQUIRED
(Other instructions on re-
verse side)
88210

Blm Roswell District
Modified Form No.
NM60-3160-4

CLSF

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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		3a. Area Code & Phone No.		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR FRED POOL DRILLING, INC.		505 623 8202		NM 58815	
3. ADDRESS OF OPERATOR P.O. Box 1393, Roswell, N.M. 88201		RECEIVED		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FSL and 1980' FWL		FEB 15 '90		7. UNIT AGREEMENT NAME	
14. PERMIT NO. 30 015 26222		15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3321' GR		8. FARM OR LEASE NAME Ronadero Federal	
				9. WELL NO. 2	
				10. FIELD AND POOL, OR WILDCAT Und Turkey Trk. SRO-G-SA	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA Sec. 31-T19S-R30E	
				12. COUNTY OR PARISH Eddy	
				13. STATE N.M.	

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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACATURE TREAT	<input type="checkbox"/>	FRACATURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
FULL OR ALTER CASING	<input type="checkbox"/>	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
MULTIPLE COMPLETE	<input type="checkbox"/>		
ABANDON*	<input type="checkbox"/>		
CHANGE PLANS	<input type="checkbox"/>		
(Other) recomplete up hole	<input checked="" type="checkbox"/>		

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.)

February 1, 1990: As per telephone conversation with Shannon Shaw,
BLM petroleum engineer:

1. We intend to set SV EZ drill cement retainer at 3790' and squeeze perforation at 3814-23 with 200 sx Class "H" cement.
2. Re-perforate at 3685-94 with 8 shots., and acidize with 1500 gals. acid.

RECEIVED

FEB 15 1990

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

SIGNED <u><i>Fred Pool</i></u>	TITLE <u>Vice President</u>	DATE <u>2-1-90</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE <u>2-14-90</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side