

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 43-R1424.

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. NAME OF OPERATOR Fred Pool Drilling, Inc.		2. ADDRESS OF OPERATOR P.O. box 1393, Roswell, N.M. 88201		3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface		4. PERMIT NO. 30-015-26403		5. RESERVATION (Show whether DT, RT, OR, etc.) 3321' Gr		6. IF INDIAN, ALLOTTEE OR TRIBE NAME		7. FARM OR LEASE NAME Ronadero Federal		8. WELL NO. 4		9. FIELD AND FOOT, OR WILDCAT WC		10. SEC., T., R., M., OR BLK. AND SUBSECT OR AREA Sec. 31-19S-30E		11. COUNTY OR PARISH Eddy		12. STATE N.M.	
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14. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	FILL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL				
FRAC TURE TREAT	MULTIPLE COMPLETION	FRAC TURE TREATMENT	ALTERING CASING				
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*				
REPAIR WELL	CHANGE PLANS	(Other)	(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.)

July 25, 1990:

Perforated well 3638 to 3714', 12 holes.
Acidized well with 1000 gals. 15% NFE acid.
Frac well with 20,000 gals gel water;
36,500# 12/20 sand.

July 26, Put well on pump to pump back load.

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

SIGNED *Anta Goral* TITLE Vice President DATE 8-2-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

45F

RECEIVED

AUG 3 10 35 AM '90

CASE AREA

RECEIVED
AUG 2 1990