Form 3100-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Oil Cons.

I. J. DIV-Dist. 2

1301 W. Grand Avenue PPROVED

Artesia, NM 8824 Breau No. 1004-0135

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5. Lease Designation and Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS	NM 84701
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	6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designation
1. Type of Well Oil Gas Well Well Other	8. Well Name and No.
2. Name of Operator	Dagger Draw 31 Federal #1
Nearburg Producing Company 3. Address and Telephone No.	9. API Well No.
Total	30-015-26425
3300 North "A" Street, Bldg 2, Ste 120, Midland, TX 79705 (915) 686-8235 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)	10. Field and Pool, or Exploratory Area
	Dagger Draw; Upper Penn; North
Unit D, 660' FNL and 660' FWL, Section 31-19S-25E	11. County or Parish, State
	Eddy County, NM
12 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OF	ROTHER DATA
TYPE OF SUBMISSION TYPE OF ACTION	
Notice of Intent Abandonment	Change of Plans
Recompletion	New Construction
Subsequent Report Plugging Back	Non-Routine Fracturing
Final Abandonment Notice Casing Repair	Water Shut-Off
Chemig Casing	Conversion to Injection
Other	Dispose Water (Note: Report results of multiple completion on Well
 Describe Proposed or Completed Operations (Clearly state all pertinet details, and give pertinent dates, including estimated date of directionally drilled, give subsurface locations and measured and true vertical depths for all markders and zones pertinent to this work. Nearburg Producing Company has temporally abandon above referenced well. MIRU well service unit on 10/08/01. POOH w/ production equipment. Set CIBP at 7613' on 10/09/01. Circulate with pkr fluid. Run M.I.T. @ 500# for 30 mins. Witnessed by BLM on 10/09/01. 	starting any proposed work. If well is rk.)*
6.) RDMO well service unit on 10/10/01.	BECCALERIE
(Attached pressure chart)	
APPROVED FOR / 2 MONTH PERIOD	
ENDING	
4. I hereby certify that the foregoing is true and correct Signed Title Regulatory Analyst	Det 10/29/2001
(This space for Federal or State office use)	Date 10/29/2001
Approved by Title Conditions of approval, if any:	Date

