

(July 1989)
(Formerly 9-331)

UNITED STATES

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTCONTACT RECEIVED
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on reverse
side)BLM Roswell District
Modified Form No.
NM060-3160-4

c15f

5. LEASE DESIGNATION AND SERIAL NO.
LC-047800(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Comanche Federal9. WELL NO.
110. FIELD AND POOL, OR WILDCAT
Shugart (Delaware)11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 12, T18S, R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3768' GR.

12. COUNTY OR PARISH
Eddy13. STATE
NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) Set & Cement Casing

(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.)*

Spud well @1330 hrs. on 3/08/91.

Set 8-5/8" 28#,K-55 csg @427'. Cmt w/300 sx Class C + 2% calcium chloride. Circulate 85 sx.

WOC 18-1/4 hrs. Pressure test 8-5/8" csg @1500 psi for 30 minutes--OK.

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

SIGNED

TITLE

Sr. Staff Env./Reg. Spec.

DATE

14 March 1991

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side