

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

(Other instructions
verse side)

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-4350	
2. NAME OF OPERATOR Spence Energy Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ELM CARISBEO	
3. ADDRESS OF OPERATOR 4849 Greenville Avenue, Suite 381, Dallas, TX 75206		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650' FSL & 2305' FWL of Sec. 23-19S-30E Unit Letter K (SENESW)		8. FARM OR LEASE NAME Unocal Federal 23	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3286.4 GL		10. FIELD AND POOL, OR WILDCAT N. Hackberry Yates	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23-19S-30E	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input checked="" type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>

(Other) Correct report of 7/25/94

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>

(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.)

Preparing to fracture treat Yates sand interval from 1752' to 1760', 1780'-1792', 1810'-1824, 1868' - 1880' with 26,000 gals 40 # linear gell and 54,000 # 16/30 Brady Sand, utilizing 45 ball sealers. Set pkr @ 1650'. Treat down 2 3/8" tbg.

SEP - 8 1994

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

SIGNED L. O. Spence TITLE President DATE 8/16/94
 (This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side