	_	un.	cours, a, procedu   Budget Bureau No. 1004-0135	
5100-5 (November 1983)	UNITED STATES DEPARTMENT OF THE INTERIOR	SUBMIT IN TRIPLI E. (Other instructions 16m) re-	Expires August 31, 1985  5. LEASE DESIGNATION AND BERIAL NO.	
(Formerly 9-331)	DEPARTMENT OF THE INTERNI	Actes mas		
	BUREAU OF LAND MANAGEMENT		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
SUND (Do not use this fo	ORY NOTICES AND REPORTS Corm for proposals to drill or to deepen or plug be "APPLICATION FOR PERMIT—" for such pro-	ON WELL RECEIVED		
		Arico * / no s	7. UNIT AGREEMENT NAME	
WELL WELL X	OTHER	<u> </u>	8. FARM OR LEASE NAME	
2. NAME OF OPERATOR	many I B	w.	Federal 4 Com	
PETTUS UIT CO	ompany, L. P.	3.0 material 1994/19	9. WBLL NO.	
12377 Merit [	rive, Suite 1600 Dallas,	Texas 75251	10. FIELD AND POOL, OR WILDCAT	
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)  See also space 17 below.)			Burton Flat (Atoka)	
At surface			11. SEC., T., B., M., OR BLE. AND	
2787! EMI and	1 860' FEL of Sec. 4		SURVEY OR AREA	
2707 FNL and	1 dod 122 di Seet V		Sec. 4, T21S, R27E	
14. PERMIT NO	15. ELEVATIONS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE	
	3183' GR		Eddy NM	
16.	Check Appropriate Box To Indicate N	ature of Notice, Report, or C	Other Data	
NC	OTICE OF INTENTION TO:	acasequ	CENT REPORT OF:	
TEST WATER SHUT-OF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTUBE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE	ABANDÓN*	SHOUTING OR ACIDIZING	Tugback and Acid jobX	
REFAIR WELL	HANGE WANS	Note: Report results	of multiple completion on Well letion Report and Log form	
Other)  17. DESCRIBE PROPOSED OR proposed work. If nen. with work.	COMPLETE: OPERATIONS of leading state all pertinent well is directionally drilled, give subsurface locat	and the partition of dates	including estimated date of starting any	
02-1	10 606'. Acidized well v	. Dump bailed cement orated with 3-3/8" HF with 2000 gals 7.5% M	at 11,175' and dump from 11,175 to 11,130'. perf gun 4 spf from 10,598 for-Flow w/1000 SCF/bbl N <sub>2</sub> 4500#. Flow back and clear	
			Part ID-2 5-5-89 P+A	
18. I hereby certify that	the foregoing is true and correct	Regulatory Coordinate		
(This space for Federal or State office use)		<u></u>	ACCEPTED FOR RECORD	
	THE P		DATE	
CONDITIONS OF A			APR 2 1 1989	
			•	

\*See Instructions on Reverse Side

SOS CARLSBAD, NEW MEXICO