5. LEASE

LC - 067144

## UNITED STATES DEPARTMENT OF THE INTERIOR

| GEOLOGICAL SURVEY  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                  |
|--|---|
| 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 Form 9–331–C for such proposals.)  | 7. UNIT AGREEMENT NAME Big Eddy                       |
|  | 8. FARM OR LEASE NAME<br>Big Eddy                     |
| 1. oil gas well other  | 9. WELL NO.   |
| 2. NAME OF OPERATOR  | 41  |
| Bass Enterprises Production Co. V. C. C. D.  | 10. FIELD OR WILDCAT NAME                             |
| 3. ADDRESS OF OPERATOR   | Indian Flat Atoka                                     |
| P.O. Box 2760 , Midland, Texas 79702   | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA      |
| 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)   | Sec.35, 21S 28E                                       |
| at surface: 1980'FSL&1980' FEL Unit Letter J.  | 12. COUNTY OR PARISH 13. STATE                        |
| AT TOP PROD. INTERVAL:<br>AT TOTAL DEPTH: Same as above  | Eddy New Mexico                                       |
| and the same of th | 14. API NO.   |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  | 30-015-21325<br>15. ELEVATIONS (SHOW DF, KDB, AND WD) |
|  | 3178.4' GL 3198' KB                                   |
| REQUEST FOR APPROVAL TO:  SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF  FRACTURE TREAT  SHOOT OR ACIDIZE  REPAIR WELL  PULL OR ALTER CASING  MULTIPLE COMPLETE  CHANGE ZONES  ABANDON*  (other)  Temporary Shut-in  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is demeasured and true vertical depths for all markers and zones pertinent.   | lirectionally drilled, give subsurface locations and  |
| This well will be shut in pending additional cease the occasional venting of gas which was   |   |
|  |   |
| 144 - 175 -  |   |
| Subsurface Safety Valve: Manu. and Type  | Set @ Ft.   |
| 18. I hereby certify that the follogoing is true and correct   |   |
| SIGNED RIL HOWKIELE TITLE Sr. Prod. Cle  | rk Date December 17, 1987                             |
| (This space for Federal or State of  | ACCEPTED FOR RECORD                                   |
| APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:  | DATE  |
|  | i/dr 2.2 1988   |
|  | SJS   |

\*See Instructions on Reverse Side

CARISEAD, NEW MEXICO