

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE  
(Other instructions on  
reverse side)

Budget Bureau No. 1004-  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

NMNM25348

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 "APPLICATION FOR PERMIT" for such proposals.)

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Hallwood Petroleum, Inc.

3. ADDRESS OF OPERATOR

P.O. Box 378111 Denver, CO 80237

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)

At surface

Unit E 1980' FNL 915' FWL

14. PERMIT NO.

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

3,512' GL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal RV 10

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Revelation (Morrow)

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Section 10 T22S R25E

12. COUNTY OR PARISH

Eddy

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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANE

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

PLEASE SEE ATTACHED PROPOSED PLUGGING PROCEDURE.

*Notify BLM Prior To Any Well At (505) 887-1544*

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

SIGNED

*Debi Sheely*  
Debi Sheely

TITLE Sr. Engineering Technician

DATE 4/8/92

(This space for Federal or State official use)

APPROVED BY

*David H. Mass*  
David H. Mass

TITLE

DATE 4 23 92

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side