

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
811 S. 1st Street
Artesia, NM 88210-2834

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993
Lease Designation and Serial No.
NM0554771

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
J. C. Williamson

3. Address and Telephone No.
P.O. Box 16, Midland, TX 79702

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FNL & 2310' FWL
Sec. 16, T-20-S, R-29-E

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
TOG Federal #1

9. API Well No.
30-015-22974

10. Field and Pool, or Exploratory Area
East Burton Delaware

11. County or Parish, State
Eddy County, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

- (1) 2-01-01 Set 4-1/2" CIBP @ 5528' w/ 35' cmt.
- (2) 2-01-01 Circulate well w/ mud gel.
- (3) 2-05-01 Spot 25 sx cmt. from 2330' to 1992', try WOC & tag, No tag.
- (4) 2-05-01 Re-spot 25 sx cmt. from 2337' to 1992', WOC & tag @ 2030' OK.
- (5) 2-06-01 Cut 4-1/2" csg. @ 673', spot 50 sx cmt. from 738' to 524', WOC & tag @ 573', OK.
- (6) 2-06-01 Spot 20 sx cmt. from 60' to Surface.

Approved as to plugging of the well bottom.
Liability under bond is retained until
surface restoration is completed.

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

Signed David R. Glass Title Agent Date 02/28/01

(This space for Federal or State office use)

Approved by (ORIG. SGD.) DAVID R. GLASS Title PETROLEUM ENGINEER

Conditions of approval, if any:

Date MAR 12 2001