

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil & Gas Division  
311 S. 1st St.  
Albuquerque, NM 88210-2834

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**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  
**STRATA PRODUCTION COMPANY**

3. Address and Telephone No. **P.O. Box 1030  
Roswell, New Mexico 88202-1030**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**990' FSL & 712' FWL  
Section 25-20S-28E**

5. Lease Designation and Serial No.  
**NM-17103**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

Well Name and No.

**Lee Federal #5Y**

8. API Well No.

**30-015-24995**

10. Field and Pool, or Exploratory Area

**Scanlon Delaware**

11. County or Parish, State

**Eddy County, New Mexico**

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

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

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.)\*

Strata Production Company requests approval to recomplete well in the following manner:

RU completion unit. ND wellhead. NU BOP. TOH with production string, rods and pump. Drill out cement and CIBP at 5560'. Clean out to 5800'. TIH with RBP and set at 5360'. Perforate 23 .42 holes at 5267'-5345'. Acidize and frac. Flow back and swab test. TIH with production string, rods and pump. Swab test. Place on production.

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

Signed Carol J. Garcia

Title Production Records Manager

Date 11/26/97

(This space for Federal or State office use)

Approved by DAVID A. GLASS

Title PETROLEUM ENGINEER

Date DEC 02 1997

Conditions of approval, if any: