N.M. Oil Cor Division 811 S. 1st Street Form 3160-5 HE INTERIOR Budget Bureau No. 1004-0135 (June, 1990) Expires: March 31, 1993 5. Lease Designation and Serial No. SUNDRY NOTICES AND REPORTS ON WELLS NMNM40256 Do not use this form for proposals to drill, or to deepen or reentry to a different reservoir 6. If Indian, Allotte or Tribe Name Use "APPLICATION FOR PERMIT TO DRILL" for such proposals SUBMIT IN TRIPLICATE 7. If Unit or CA, Agreement Designation 1. Type of Well Oil Well Gas Well Other: 8. Well Name and No. 2. Name of Operator V Darlene Jordan H. W. STOTT FED #2 TOM BROWN, INC. Phone: (915) 688-9472 9. API Well No. 3. Address and Telephone No. 30-015-25112 P. O. Box 2608, Midland, Texas 79702 10. Field and Pool, or Exploratory Area 4. Location of Well (Footage, T, R, M, or Survey Description) Fenton; Delaware, NW 2310' FWL & 860' FSL 11. County or Parish, State Section 01, T-21-S, R-27-E Eddy Co., New Mexico CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 12 TYPE OF SUBMISSION TYPE OF ACTION Abandonment Change of Plans Notice of Intent Recompletion New Construction Plugging Back Non-Routine Fracturing Subsequent Report Casing Repair Water Shut-Off Altering Casing Conversion to Injection Final Abandonment Notice Surface Casing/Cementing 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 markets and zones pertinent to this work.) APPROVED FOR 12 MONTH PERIOR. 1. MI RU PU 2. LD Rods and pump 3. TOH w/tbg 4. TIH w/CIBP, set @ 2700 5. Circ hole w/2% KCI 6. Press test and record 7. Well is TA. ACCEPTED FOR RECORD work done August 17, 1999 AUG 2 5 1999 (daig sen LES 3) LEASE SUBMIT PRESSURE CHART Signed: 才itle: Production Analyst Date: August 18, 1999 (This space for Federal or State office use) Approved by: Title: Date: Conditions of approval, if any: