

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL. TE.
OTHER SECTION
reverse side

Form approved.
Budget Bureau No. 1004-4
Expires August 31, 1985

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS

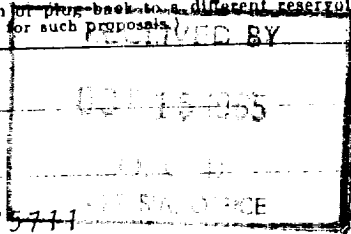
(Do not use this form for proposals to drill or to deepen or plug-back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Newbourne Oil Company

3. ADDRESS OF OPERATOR
P. O. Box 7698, Tyler, Texas 75711

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
660' FNL & 660' FWL



5. LEASE DESIGNATION AND SERIAL
NM-59011

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal "J" Comm.

9. WELL NO.
1

10. FIELD AND POOL OR WILDCAT
Rocky Arroyo Wolfcamp
South Gas Pool

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
29-22S-22E

12. COUNTY OR PARISH
Eddy

13. STATE
N.M.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4561.4 GL

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☒
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	☐		
PULL OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETE	☐	ALTERING CASING	☐
ABANDON*	☐	ABANDONMENT*	☐
CHANGE PLANS	☐		

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.)

Spudded @ 1:30 PM, 10-5-85. Ran guide show, 40' shoe joint, insert float, 3 centralizers, 5 joints 13-3/8" 61# MR ST&C casing. Total of 204' set at 200'. Halliburton cemented with 350 sacks Class C with 2% CaCl, 1/4# floccle. PD to 159' at 11:15. Circulated 50 sacks.

> APP ap'd for SCO'

18. I hereby certify that the foregoing is true and correct
SIGNED Raymond Thompson TITLE Exploration Secretary DATE 10/17/85
(This space for Federal or State office use)

APPROVED BY FOR APPROVAL TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

OCT 11 1985

*See Instructions on Reverse Side