

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. Lease Designation and Serial No.

NM-56520

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Sheep Draw Fed. 28-13

9. API Well No.

3001529532

10. Field and Pool, or Exploratory Area

11. County or Parish, State

Eddy County, New Mexico

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

Louis Dreyfus Natural Gas

3. Address and Telephone No.

P.O. Box 370, Carlsbad, NM. 88221-0370 (505)885-1313

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec. 28-22S-26E, 1650' FSL & 330' FWL

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

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other **H2S Report**
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ 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.)*

In compliance with Onshore Order No. 6:

This well produces 75,720 ppm H2S in the gas stream.

Production of gas is 6 MCF/d.

The 100 ppm R.O.E. = 62 ft.

The 500 ppm R.O.E. = 28 ft.

The R.O.E. does not include a public road.

ACCEPTED FOR RECORD

NOV 19 1997

(CPIG SGN) GARY GOURLEY

RECEIVED
NOV 12 A 10:59
BUREAU OF LAND MGMT.
LAND RESOURCE AREA

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

Signed **[Signature]**

Title **Environmental & Safety Director**

Date **October 29, 1997**

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date