		CONTACT RECEIVING	RIM Bosouth bear a
Form 3160-5 (July 1989)	UNITED STATES	OFFICE FOR NUMBER	MM Roswell District Modified Form No.
(Formerly 9-331) DE	PARTMENT OF THE INTERI	OR (Other Instructions of Fe-	N1060-3160-A
	BUREAU OF LAND MANAGEMENT		5. LEASE DESIGNATION AND BREIAL NO.
CHAIDDA			MM 0144698 6. IF INDIAN, ALLOTTER OR TRIBE NAME
Do not use this form:	' NOTICES AND REPORTS C	N WELLS OUT 17 30	THE NAME OF THESE NAME
Use	for proposals to drill or to deepen or plug by "APPLICATION FOR PERMIT" for such pr	oponnia,)	-
OIL GAN X		ARTESIA, OFFICE	7. UNIT AGREEMENT NAME
WELT, WELT, A	OTRER	ARTESIA, OFFICE	
	oration of Delaware	39. Area Code 6 Phone No. 214-528-5898	S. FARM OR LEASE HANE
ADDRESS OF OPERATOR	orderon or belawate	214-328-3898	Superior Federal
3131 Turtle Creek	Blvd., Ste. 400, Dallas, TX	75219-5415	9. WHLL NO.
LOCATION OF WELL (Report See also space 17 below.)	location clearly and in accordance with any i	State requirements	_
At surface			10. PIRLD AND POOL, OR WILDCAT
2130 FWL & 990 FSL			East Burton Flat Straw!
			SURVEY OR ARMA
			Sec 1 TOO DOOR
4. PERMIT HO.	15. ELEVATIONS (Show whether pr.	RT, GR, etc.)	Sec 1, T20S, R29E
·—————————————————————————————————————	Ground 3298 ft.		Eddy NM
e. Ci	neck Appropriate Box To Indicate No	ature of Notice Report as O	
	OF INTENTION TO:		
TEST WATER RHUT-OFF		новня оп	PHT REPORT OF:
PRACTURE TREAT	MULTIPLE COMPLETE	WATER SHUT-OFF	REPAIRING WELL
RHOOT OR ACIDIEN	ABANDON*	PRACTI'RE TREATMENT	ALTERING CABING
REPAIR WELL,	CHANGE PLANS	SHOOTING OR ACIDIZING	ARANDONMENT®
tOther)		(Other) Testing &	f multiple completter m
7. DESCRIBE PROPERTO OR COMPI proposed work, If well inent to this work,) *	ETEN OPERATIONS (Clearly state all perfinent s directionally drilled, give subsurface location	authanna at streamble	tion Report and Log (orm.)
Tested the Morror	t through		
produce. Set bri	through perforations at lidge plug at 11690 ft. and o	1700-11708', zone swal capped with cement P.1	obed dry. Too tight to 3.D. 11670 ft.
T WILL 14 11. 11	through perforations at ll are. Set bridge plug at l the Strawn through perfora	10/0 and cannod with a	Amont D. D. D. LLOCO C.
* UNECOMOMIC	AL.		
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			EC.
		Alex	
			19
	•		RECEIVED
			AM '90 FACE TERS
I hereby certify that the fore	going is true and correct		· · · · · · · · · · · · · · · · · · ·
SIGNED DAMA	1A 1	rict Operations Engin	eer name 10-08-90
(This space for Federal or S			DAIN JO JO
	71		
APPROVED BY	TITLE		DATE
	M, AF AITAA/		