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NM OIL CONS. COMMISS. N
DRAWER DD
UNITED STATES ARISTESIA NM 88210
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
JUN 8 4 30 PM '93

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 AREAS RECEIVED

SUBMIT IN TRIPLICATE

<p>1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other</p> <p>2. Name of Operator Bass Enterprises Production Company</p> <p>3. Address and Telephone No. P.O. Box 2760, Midland, Texas 79702 915-683-2277</p> <p>4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FWL and 495' FNL Section 17, T21S, R29E</p>	<p>5. Lease Designation and Serial No. 1980-118 0509 (SSS)</p> <p>6. If Indian, Allottee or Tribe Name None</p> <p>7. If Unit or CA, Agreement Designation None</p> <p>8. Well Name and No. Golden "D" Federal #1</p> <p>9. API Well No.</p> <p>10. Field and Pool, or Exploratory Area South Golden Lane Delaware</p> <p>11. County or Parish, State Eddy County, New Mexico</p>
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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 type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input checked="" type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>change location</u> (SSS)
	<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

(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.)*

Request modification of the mud and casing programs (points 3, 5 & 6). Experience drilling in the portion of the field indicates intermediate casing string will not be needed.

Point 3: Set 9-5/8" surface casing @ approximately 900'.
Delete 8-5/8" casing. 5-1/2" casing @ 4800' and cement circ to surface.

Point 5: 900-4800' BW Mud 10.0 - 10.2 ppg

Point 6: Delete Intermediate Interval
Production 1945 sx (250% excess)
4800' Class C w/additives for water loss control.

Location originally designated as: 1775' FWL and 330' FNL of Sec 17, T21S, R29E

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

Signed Barry A. Allen Title Engineering Assistant Date 6-3-93

(This space for Federal or State office use)

Approved by Shannon J. Shaw Title Assistant Manager Date 6/9/93
Conditions of approval, if any: