

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION
Drawer DD
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

NM-18219

6. If Indian, Allottee or Tribe Name

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

RECEIVED

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

GENERAL ATLANTIC RESOURCES, INC

3. Address and Telephone No.

410-17th Street, Denver, CO 80202 (303) 573-5100

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

1980' FSL 1980' FWL 27-T20S-R28E

7. If Unit or CA, Agreement Designation

Burton Flats Deep Unit

8. Well Name and No.

Burton Flats Deep Unit #41

9. API Well No.

30-015-27800

10. Field and Pool, or Exploratory Area

Atoka

11. County or Parish, State

Eddy, New Mexico

12. 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 First Intermediate csg
☐ 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.)

1/22/94 - Ran 13-3/8", 48#, H-40 csg set @665' and cmt 350 sx Class "C" 35/65 poz plus 6% gel 1/4# sk cellophane + 1 % CaCl + 10#/sk salt, followed by 200 sx class "C" neat + 2% CaCl + 1/4# sk cellophane

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

Signed Robert D. Mowry

Title Senior Operations Engineer

Date 4/13/94

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: