

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other Instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.
NMNM15003

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
NM OIL CONS COMMISSION

7. UNIT AGREEMENT NAME
Artesia, NM 88210

8. FARM OR LEASE NAME
GOVERNMENT AB

9. WELL NO.
6

10. FIELD AND POOL, OR WILDCAT BONE
OLD MILLMAN RANCH - SPRINGS

11. SEC. T, R, M, OR BLK AND
SURVEY OR AREA

SEC 10 T20S R28E

14. PERMIT NO.

300152784600S01

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

3278

12. COUNTY OR PARISH

EDDY

13. STATE

NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

SET CASING & CEMENT

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and five 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.)*

DRILL 11" HOLE TO 3117'. RIH W/ 8-5/8" 24-32# K-55 CASING & SET @ 3009'. M&P 1200sx PACESETTER LITE (C) CMT W/ 6% GEL + 5% SALT + 1/4# CELLO-SEAL TAILED W/ 200sx CL C CMT W/ 2% CACL, DISPLACE W/ FW. CIRC 197sx TO PIT. BLM NOTIFIED, DID NOT WITNESS. WOC - 8HRS. ND BOP, SET SLIPS CUT OFF CSG, NU BOP, TEST TO 2000#, HELD OK. RIH & DRILL CMT, TEST FORMATION TO 1500#, HELD OK, DRILL AHEAD.

J. Lora
1994

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

SIGNED

TITLE

REGULATORY ANALYST

DATE

3/15/94

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side