Form 3160-5 (June 1990)	DEPARTMENT	D STATES OF THE INTERIOR ND MANAGEMENT	FORM APPROVED Budget Bureau No. 1004 C 35 Expires March 31, 1893 5. Lease Designation and Serial No.
	SUNDRY NOTICES AN	ND REPORTS ON WELLS	NM 54398
Do not use this form for proposals to crill or to deepen or reentry to a different reservoir Use "APPLICATION FOR PERMIT—" for such proposals			6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE			7. If Unit or CA. Agreement Designation
1. Type of Well Onl Well X Gas Well			8. Well Name and No.
2. Name of Operator			FORTSON FED. NO. 1
THE EASTLAND			9. API Well No.
3 Address and Telephone No. P. O. DRAWER 3488, MIDLAND, TX 79702 915/683-6293			30-015-24300
F. O. DRAWER 3400, HIDLAND, 1X 79702 913/003-0293 4 Location of Well (Footage, Sec. T., R., M., or Survey Description)			10. Field and Pool, or Exploratory Area MALAGA ATO KA
			11. County or Parish, State
UNIT F, Sec.	12, T24S, R28E, 18	30' F/N-2140' F/W	EDDY, NM
		TO INDICATE NATURE OF NOTICE, REPO	RI, OR OTHER DATA
	SUBMISSION	TYPE OF ACTION	
Notice of	f Intent	Abandonment	Change of Plans
Subseque	ent Report	Recompletion Plugging Back	New Construction
		Casing Repair	Water Shut-Off
Final Abandonment Notice		Altering Casing Altering JET OUT WATER W/COIL	Conversion to Injection
		TUBING	Dispose Water (Note: Report results of multiple completion on Well
 Describe Proposed or Cor give subsurface local 	mpleted Operations (Clearly state all per tions and measured and true verical de	TUBING tinent details, and give pertinent dates, including estimated date of startin epths for all markers and zones pertinent to this work.)*	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
give subsurface local PROPOS TO IMP APPROX	itions and measured and true vertical de	TUBING tinent details, and give pertinent dates. including estimated date of startin epths for all markers and zones pertinent to this work.)* TH COIL TUBING AND JET OUT WATER US DB 2/15/96	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) g any proposed work. If well is directionally drilled,
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give subsurface local PROPOS TO IMP APPROX WILL A III. I hereby certify that the f Signed Active (This space for Federal c	tions and measured and true verical de E TO GO IN HOLE WIT ROVE GAS PRODUCTION IMATE DATE TO DC JO ILSO NEED A SMALL WO ISO NEED A SMALL WO	TUBING Timent details, and give pertinent dates, including estimated date of startin epths for all markers and zones pertinent to this work.)* TH COIL TUBING AND JET OUT WATER US B 2/15/96 RK PIT. Title	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log torm.) g any proposed work. If well is directionally drilled, IN G NITROGEN

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