

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN THE INDICATED\*  
(Other Instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry hole		RECEIVED BY APR 11 1984	5. LEASE DESIGNATION AND SERIAL NO. 30-026684
2. NAME OF OPERATOR Orla Petco, Inc. ✓			6. IF INDIAN, ALEUTIAN OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 953, Midland, Texas 79702			7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface P-990' from the FSL and 330' from the FEL, Section, 31 T-22S, R-28 East NMPM			8. FARM OR LEASE NAME Herradura-Federal
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3045.0 GR	9. WELL NO.
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data			10. FIELD AND POOL, OR WILDCAT Wildcat (Cherry Canyon)
			11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
			12. COUNTY OR PARISH, 13. STATE Eddy NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
ABANDON* <input type="checkbox"/>	
CHANGE PLANS <input checked="" type="checkbox"/>	

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

17. 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.) \*

11/08/84 Began Drilling out plugs  
11/16/84 Drilled out plugs to total depth of 3650'  
11/17/84 Ran 4 1/2" casing, 11/6 lbs. casing to total depth of 3613'  
Set D.V. Tool at 1372'.  
Cementing: 1st Stage with 300 sx of Halliburton life and 250 sx of Class C cement  
2nd. Stage with 1,075 sx of Halliburton life and 250 sx of Class C cement  
Circulated 75 sx to pit.  
11/20/84 Total Depth 3613'. Drilled out D.V. Tool at 1372'. Cleaned out hole to PBTD of 3570'  
11/21/84 Perforated 3402' - 3408' at 2 shots per ft. Ran 2 7/8" tubing to total depth of 3344'. Acidized with 1000 gallons  
11/23/84 Frac with 5500 gallons Halliburton Pur-Gel 30. 11,000 lbs. 20/40 Sand  
2/20/85 Well pumping 2 bbls oil/350 bbls. water.

INTEND TO APPLY FOR CONVERSION TO SALT WATER DISPOSAL WELL

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

SIGNED

TITLE Agent

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY: