

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

NM 59385

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

**SUBMIT IN TRIPLICATE**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Vision Energy, Inc.

3. Address and Telephone No.

P.O. Box 2459 Carlsbad New Mexico

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

Unit Letter J: 1980' Feet from the South Line and 1980' Feet  
From the East Line. Sec 3 Twn 24, R 29,

8. Well Name and No.

H.B. 3 Federal

9. API Well No.

#1

10. Field and Pool, or Exploratory Area

Wildcat ( Bone Spr

11. County or Parish, State

EDDY CNTY, NEW M

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 \_\_\_\_\_
- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on W  
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.)\*

Recompletion Report ( Please See Attached Report)

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

Signed

*Long J. Wilson*

Title

Operations Manager

Date

10-10-91

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: