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Form 3160-5 (June 1990)	DEPARTME	TED STATES NT OF THE INTERIOR LAND MANAGEMENT	O. C. D.	FORM APPROVED Budget Bureau No. 1004 0135 Expires: March 31, 1993 5. Lease Designation and Serial No.
Do not use t	SUNDRY NOTICES this form for proposals to d Use "APPLICATION FO	NM-12845 6. If Indian, Allottee or Tribe Name		
	SUBMI	7. If Unit or CA, Agreement Designation		
Address and Tele     P     Location of Well	ogo Producing Company ephone No0. Box 10340, Midla (Footage, Sec., T., R., M., or Survey E	ind, Texas 79702-7340		8. Well Name and No. Federal 1 No. 5  9. API Well No. 30-015-26909  10. Field and Pool, or Exploratory Area Livingston Ridge, Delawa  11. County or Parish, State Eddy County, New Mexico
12. CHI	ECK APPROPRIATE BOX	s) TO INDICATE NATURE	OF NOTICE, REPOR	RT, OR OTHER DATA
TYP	E OF SUBMISSION		TYPE OF ACTION	
; <b>(</b> X)	Notice of Intent Subsequent Report Final Abandonment Notice		ermediate Casing	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)
D 3 s 5	rill 11" hole to 4269 -5/8" 32# casing - sh x "C" lite with 10# s # sx salt 14.9 ppg -	', T.D. @ 19:00 hrs., low @ 4234' - float co x salt 12.7 ppg - tai plug down with 1800 p it - WOC 10-1/4 hrs.	cont to this work.)*  CST February 1,  Dlar @ 4189'. BJ  led with 200 sx "  osi 10:30 hrs., CS  - NU BOP's & "B"	Cemented with 1625 C" with 1% CAC1 <sub>2</sub> + T February 3, 1992. section, Test 2000.
		Ade	NEW WEXE	÷

14. I hereby certify that the foregoing is true and correct Signed **Market** Signed	Title Division Operations Supt.	Date March 9, 1992
(This space for Federal or State office use)  Approved by Conditions of approval, if any:	Title	Date

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.