

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION
FORM APPROVED
Drawer DD Budget Bureau No 1004-0135
Artesia, NM 88210 Expires: March 31, 1993
c15K

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

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM NM-81240 93471
2. Name of Operator Nearburg Producing Company	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Box 823085, Dallas, TX 75382-3085 214/73-1778	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1,660' FWL and 1,650' FSL, Section 7, T25S, R27E	8. Well Name and No. Mona Lisa Com #2
	9. API Well No. 30-015-23094
	10. Field and Pool, or Exploratory Area Wildcat
	11. County or Parish, State Eddy County, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>Extension Request</u>	<input type="checkbox"/> Dispose Water

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

Reguest an extension for approved APD for a period of one year.

APPROVED FOR 12 MONTH PERIOD
ENDING 9/9/96

RECEIVED
JUL 19 1995
OIL CON. DIV.
DIST. 2
JUL 15 1995
RECEIVED

14. I hereby certify that the foregoing is true and correct		
Signed <u>[Signature]</u>	Title <u>Mgr of Drlg & Prod</u>	Date <u>06/13/95</u>
(This space for Federal or State office use)		
Approved by <u>(ORIG. SCD.) JOE G. LARA</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>7/17/95</u>
Conditions of approval, if any:		

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.