

DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

EXPIRES AUGUST 31, 1983  
5. LEASE DESIGNATION AND SERIAL NO.

NM 0522A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☐ GAS WELL ☒ OTHER

RECEIVED

2. NAME OF OPERATOR

Bass Enterprises Production Co.

3. ADDRESS OF OPERATOR

P.O. Box 2760 Midland, Texas 79702-2760

AUG 29 '88

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)

At surface

O. C. D.

ARTESIA OFFICE

1980' FSL & 1980' FWL Unit Letter K

7. UNIT AGREEMENT NAME

Poker Lake Unit

8. FARM OR LEASE NAME

Poker Lake Unit

9. WELL NO.

58

10. FIELD AND POOL, OR WILDCAT

Big Sinks Wolfcamp (Gas)

11. SEC., T., R., M., OR BLK. AND SURVEY OR ALMA

Sec. 27, 24S 31E

14. PERMIT NO.

30-015-24190

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other) Change Operator Name

(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.) \*

Change Operator Name from Perry R. Bass to Bass Enterprises Production Co.

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

SIGNED A.C. Smith

TITLE Sr. Production Clerk

DATE 8-23-88

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side