

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other in duplicate)  
(Other in triplicate)  
RECEIVED

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

6. LEASE DESIGNATION AND SERIAL NO.  
NM-29234 & NM-63757  
7. 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.)

CARLSBAD  
AREA WELLS

RECEIVED

JAN 20 '89

O.C.O.

RESIA, OFFICE

UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lotos Federal

9. WELL NO.

-1-

10. FIELD AND POOL, OR WILDCAT

Und. S. Sand Dunes Lower

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

Penn.

Sec. 9, T24S, R31E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR  
Bettis, Boyle & Stovall

3. ADDRESS OF OPERATOR  
P.O. Box 1240, Graham, TX 76046

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

1980' FSL & 1980' FEL, NW/4Se/4, Unit Letter J

14. PERMIT NO.

15. ELEVATIONS (Show whether DT, RT, OR, GR)

3457.3' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

hookup for 1st gas sales

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

XX

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and 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.)\*

12/19/88 4 point test was ran - copy attached

12/20/88 Well was hooked up & gas sales began at 6:00 pm thru El Paso Natural Gas Co.'s line with Cabot being the purchaser.

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

SIGNED

*Jim Sigon*

TITLE

Production Assistant

DATE

01/04/88 89

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JAN 19 1989

SJS

\*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO