UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*
(Other instructions on reverse side)

RECEIVED

5. LEASE DESIGNATION AND SERIAL NO.
NM-0522

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.)

JAN 9 9 35 AM '89

1.

| OIL WELL | [X] | GAS WELL | [ ] | OTHER |

2. NAME OF OPERATOR

RECEIVED

Charles B. Gillespie, Jr. ✓

3. ADDRESS OF OPERATOR

P. O. Box 8   Midland, Texas 79702

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

JAN 20 '89

810' FSL & 810' FEL

14. PERMIT NO.

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

3472.7' GR   3488.2' K.B.

7. UNIT AGREEMENT NAME
Poker Lake

8. FARM OR LEASE NAME
Poker Lake Unit

9. WELL NO.
70

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 28-T24S-R31E

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:			SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF [ ]	PULL OR ALTER CASING [ ]		WATER SHUT-OFF [ ]	REPAIRING WELL [ ]
FRACTURE TREAT [ ]	MULTIPLE COMPLETE [ ]		FRACTURE TREATMENT [ ]	ALTERING CASING [ ]
SHOOT OR ACIDIZE [ ]	ABANDON* [ ]		SHOOTING OR ACIDIZING [ ]	ABANDONMENT* [ ]
REPAIR WELL [ ]	CHANGE PLANS [ ]		(Other) Production Casing	[X]
(Other)				

(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.)*

1/4/89: Drilled 7 7/8" hole to 7238'. Ran 219 jts. 5 1/2" 15.5# & 17#, J-55 casing set at 7022'. Cemented with 735 sx Halliburton 65/35 POZ 'C' containing 2% gel, .4% Halad-4. Plug down at 4:25 p.m. 1/4/89 with maximum pressure 1000#. Released pressure and plug held OK. Rig released 8:00 p.m. 1/4/89. Wait on completion unit.

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

SIGNED _____   TITLE Production Manager   DATE 1/6/89

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____   DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

SJS