

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL.
(Other instructions on re-
verse side)

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

dsf

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

2. NAME OF OPERATOR
BETTIS, BOYLE & STOVALL

3. ADDRESS OF OPERATOR
P. O. BOX 1240, GRAHAM, TEXAS 76046

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1980' FSL AND 1980' FWL OF SECTION 10

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3457.2' GL

5. LEASE DESIGNATION AND SERIAL NO.
NM-70895

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
LOTOS "B" FEDERAL

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT UNDES.
SO. SAND DUNES LOWER PENN

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 10, T. 24 S., R. 31 E.

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	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

(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.)*

INSTEAD OF SETTING 7-5/8" AND 5-1/2" LINERS AS PROPOSED IN THE APPLICATION FOR PERMIT TO DRILL, PLANS NOW ARE TO SET A 5-1/2", 23#, P-110, LTC LINER IN THE INTERVAL 11,550'- 15,300' AND CEMENT WITH APPROXIMATELY 1500 SACKS OF 50/50 POZMIX CEMENT.

RECEIVED
JUN 11 8 26 AM '90
CARLTON
AREA
HOE
INDERS

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

SIGNED Arthur R. Brown TITLE Agent

DATE June 6, 1990

(This space for Federal or State office use)

APPROVED BY Shannon J. Shaw
CONDITIONS OF APPROVAL, IF ANY:

TITLE PERMITS ENGINEER

DATE 6-21-90

*See Instructions on Reverse Side