FORM APPROVED OMB No. 1004-0135 Expires July 31, 1996

UNILED STATES 811 S. 1st Street DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

CHNDD.	V NOTICES AND REPO	RTS ON WA	rtesia, NM	1 88210-20	NM - 217		
SUNDRY NOTICES AND REPORTS ON WELLS 10-21 Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other Instructions on reverse side					7. If Unit or CA/Agreement, Name and/or No.		
I. Type of Well Oil Well Gas Well	Other	1576	REO	7282	8. Well Name	e and No.	
14 V(1)				5, 01	Worth Poderol No E		
2. Name of Operator Stephens & Johnson Operating Co.					9. API Well No.		
3a. Address 76307 3b. Phone Sp. (inclu				'//	30-015-30986		
P.O. Box 2249, Wichita Falls, TX (940) 723				1.	10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				₩ E	Brushy I	Draw, Delaware	
4. Location of Well (Pooluge, Sec., 1., 1c, 11., or Survey Description)					11. County or Parish, State		
660' FSL, 990' FWL, Sec. 14, T26S, R29E					Eddy County, NM		
12. CHECK AP	PROPRIATE BOX(E\$) TO	O INDICATE	NATURE O	F NOTICE, RI	EPORT, OR	OTHER DATA	
TYPE OF SUBMISSION			TYPE O	F ACTION			
D 31-1-1-1-1	☐ Acidize	Deepen Deepen		Production (Start	/Resume)	☐ Water Shut-Off	
Notice of Intent	Alter Casing	Fracture Ti	reat 🔲	Reclamation	☐ Well Integrity		
Subsequent Report	Casing Repair	New Const	truction 🔲	Recomplete	Ţ	Other Completion	
	Change Plans	Plug and A	_	Temporarily Ab	andon		
Final Abandonment Notice	Convert to Injection	Plug Back	_				
Cleane 4-25-2000: Perfor 4-26-2000: Acidiz 4-27-2000: Sand f 1bs 16 4-28 to 5-1-2000:	out DV Tool @ 4463 d out 5 1/2" csg t ated Williamson Sa e Williamson Sand racture Williamson /30 Brady Sand. Swab and clean up mping unit and put	o PBTD of and 5112-5 w/2000 ga a Sand w/1 well and	5245' KE 152' KB, 1s 7 1/2% 8,000 gal	2 spf. Fercheck s 25# Deli to, tbg and On. ACCE	acid. ta 140 an rods. TED FOR F	a 63,000 ECORD ID R. GLASS	
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) William M. Kincaid			Tide Petr	Petroleum Engineer			
Signature 100			Date				
Willi M	. Funcaid			18, 2000	Diden Account Point No. 1		
	THIS SPACE F	OR FEDERA		E OFFICE USI			
Approved by			Title	Title Date			
Conditions of approval, if any, are secretify that the applicant holds lega which would entitle the applicant to complete	l or equitable title to those right	te does not warrats in the subject	ant or Office lease				

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