

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

2005 JUL 5 PM 12:42

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir  
Use "APPLICATION FOR PERMIT -" for such proposals

RECEIVED NM-99705

070 FARMINGTON, NM

5. Lease Designation and Serial No.

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Synergy Operating, LLC (163458)

3. Address and Telephone No.

PO Box 5513  
Farmington, NM 87499

(505) 325-5549

4. Location of Well (Footage, Sec, T. R., M, or Survey Description)

Unit B, 330' FNL, 2310' FEL, Sec 08, T19N - R04W

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Eagle Springs "8" Federal # 2M

9. API Well No.

30-043-20950

10. Field and Pool, or Exploratory

Menefee (Oil) - WC19N4W8B

11. County or Parish, State

Sandoval  
New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other

☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well  
Completion or recompletion Report and Log Form)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.  
If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.

SYNERGY RESPECTFULLY REQUESTS CONTINUED SHUT-IN STATUS OF THIS WELLBORE TO BE APPROVED UNTIL SUCH TIME AS THE EAGLE SPRINGS FEDERAL # 1 WELLBORE IS EITHER PLUGGED AND ABANDONED, OR REMEDIAL WORK IS PERFORMED TO PERMIT THAT WELLBORE FOR WATER DISPOSAL PER THE NMOCD.

SYNERGY BELIEVES THAT WE WILL SECURE ALL PARTNER APPROVALS AND A WORKOVER RIG TO PERFORM THE WORK IN NINETY (90) DAYS.

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

Signed: Thomas E. Mullins

Title: Engineering Manager Date: 07-01-2005  
Telephone: (505) 566-3725

This space for federal or state office use

Approved by: Original Signed: Stephen Mason  
Conditions of approval if any

Title: \_\_\_\_\_ Date: JUL 11 2005