

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

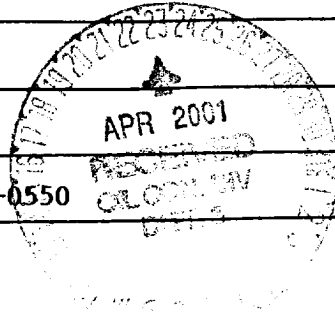
HOLCOMB OIL AND GAS, INC.

3. Address and Telephone No.

P.O. Box 2058, Farmington, NM 87499 (505)326-0550

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

790' FSL; 1650' FEL; Sec. 29 T29N-R10W NMPM



5. Lease Designation and Serial No.

SF-07862/

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

BrookhavenA#2

9. API Well No.

30-045-05215

10. Field and Pool, or Exploratory Area

Basin Fruitland Coal

11. County or Parish, State

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

(Note: Report results of multiple completion on Completion or Recompletion Report and Log for)

13. 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.)*

Requesting a sixty (60) day extension of putting well back on production while negotiating the sale of the well.

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

Signed

W. J. Holcomb

Title W. J. Holcomb, President

Date 4/13/01

(This space for Federal or State office use)

Approved by

Title

Date 4/19/01

Conditions of approval, if any: