

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. SF 078896	
2. NAME OF OPERATOR Beta Development Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR c/o Mesa Operating Ltd Partnership, P.O.Box 2009, Amarillo, TX		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790' FSL/1450' FEL		8. FARM OR LEASE NAME MUDGE FEDERAL	
14. PERMIT NO.		9. WELL NO. #5	
15. ELEVATIONS (Show whether DF, ST, GR, etc.) 6228' GR		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33-27N-11W	
		12. COUNTY OR PARISH San Juan	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	P&A <input checked="" 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.)*

MI & RU Big "A" Rig # 6 on 9/29/88 to P&A well. RIH & tagged retainer @ 6143'; mixed & pumped 15 sx plug on top of retainer @ 6143'-5945'; mixed and pumped 45 sx Class "B" Neat from 5405'-5015'; tested casing to 1000 psig; pumped down tubing, circ up bradenhead. Set CIBP @ 3400'; set retainer @ 1930', mixed and pumped 300 sx Class "B" cement, dumped 1 bbl on top of retainer. RIH & perfed 4 holes @ 1692'; mixed and pumped 50 sx cement, spotted cement, squeezed away 38 1/2 sx cement from 1692'-1592'. RIH & perf'd 4 holes @ 1460', mixed and spotted 65 sx Class "B" plug, squeezed 50 sx cement into annulus 1460'-1260'; RIH and perf'd @ 746', mixed and pumped 244 sx Class "B" Neat, 57 sx in 4 1/2" casing and 187 sx in annulus. Good circ up annulus. No cement to surface. Pressured annulus to 300 psig for 15 min. OK. Ron Snow w/BLM on location during plugging. Cut wellhead, welded on dry hole marker, Well P&A 10/3/88.

Approved as to plugging of well by _____
Liability under and in accordance with _____
and its restoration is completed.

RECEIVED

OCT 2 01988

OIL CON

cc: BLM-F (0+5), Reg, Prod Rcds, Land, Expl.

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

SIGNED

Caryn L. McKee

TITLE

Regulatory Analyst

DATE

10/10/88

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

James E. Edwards Jr.
AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side