

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-078089
2. NAME OF OPERATOR Beta Development Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 238 Petroleum Plaza, Farmington, NM 87401	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 990' FNL & 1650' FEL	8. FARM OR LEASE NAME Scott Federal
9. WELL NO. 8	10. FIELD AND POOL, OR WILDCAT Basin Dakota
11. SEC., T., R., OR BLK. AND SURVEY OR AREA Sec. 22, T-27N, R-11W	12. COUNTY OR PARISH San Juan
13. STATE New Mexico	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6352' D. F.

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 COMPLETION	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input 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.)

Propose to P & A:

Pump 60 sx cement class "B" thru model "P" packer @ 6492; into 4½" csg. perforations 6552-6656' top & bottom.

Spot 35 sx class "B" cement 5525 (305') 5220

Perforate 5½" csg. @ 3650', spot & squeeze 35 sx @ 3550'-3650'

Perforate 5½" csg. @ 2986', spot & squeeze 35 sx @ 2886-2986'

Spot 100' plug across 2-stage tool @ 2200' Perforated Csg. 205-1966

Free point & pull all recoverable 5½" casing.

Spot cement plug 50' in & 50' out of csg. stub

100' cement plug 1790-1890 or if csg. in place perf. 2 holes & squeeze

209' cement plug 1081-872 or if csg in place perf. 2 holes 1081 & squeeze

Spot cement 50' below bottom of surface pipe @ 320' & 50' inside (270-370)

Spot 50' plug from 50' to surface and install dry hole marker,

level and clean up location, reseed as directed.

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

SIGNED

*D. E. Bayless*

TITLE

Superintendent

DATE

December 9, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOCC