

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO. SF 047039A |
| 2. NAME OF OPERATOR D.J. SIMMONS | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR P.O. BOX 1469, FARMINGTON, N.M. 87499 | | 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' FNL, 1625' FEL | | 8. FARM OR LEASE NAME HEARD COM 20 |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6024' G.L. | 9. WELL NO. # 1 |
| | | 10. FIELD AND POOL, OR WILDCAT BASIN FRUITLAND COAL |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 20-28N-10W |
| | | 12. COUNTY OR PARISH SAN JUAN |
| | | 13. STATE NEW MEXICO |

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) SPUD WELL <input type="checkbox"/> | |
| (Other): | | (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.)

9/24/90 SPUDDED WELL AT 8:00 PM 9/24/90. DRILLED TO 236'. RAN 5 JTS 8-5/8" H-40 CSG. (217.59') SET AT 232.59'. CEMENTED WITH 140 SKS CLASS "B" WITH 1/4# GEL-FLAKE AND 3% CALCIUM CHLORIDE (A65 CU.FT.) CIRC TO SURFACE. WOC 12 HRS. TESTED 600#/30 MIN. HELD O.K.

9/27/90 T.D. 2183'. RAN 49 JTS 4-1/2" 10.5# K-55 8RD CSG. (2167.69'). SET AT 2182.69'. CEMENTED WITH 341 SKS CLASS "B" 65/35 POZ, 6% GEL, 10% SALT, 0.3% FRICTION REDUCER FOLLOWED BY 100 SKS CLASS "B" WITH 1% CACL, 0.5% FLUID LOSS ADDITIVE (742 CU.FT.) WOC 12 HRS, CIRC 15 BBL CMT TO SURFACE

RECEIVED
JAN 04 1991
OIL CON. DIV.
DIST. 3

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

SIGNED [Signature]

TITLE PETROLEUM ENGINEER

DATE 11/28/90

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

DATE
DEC 27 1990

FARMINGTON, NEW MEXICO

*See Instructions on Reverse Side