

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: September 30, 1990

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 <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Proposed Well	5. Lease Designation and Serial No. SF 078762
2. Name of Operator Mitchell Energy Corporation	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 4000, The Woodlands, Texas 77387-4000; (713) 377-5818	7. If Unit or CA, Agreement Designation Rosa Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 771' FSL 1746' FEL Sec. 11 T31N R5W	8. Well Name and No. 356
	9. API Well No. 30-039-25095
	10. Field and Pool, or Exploratory Area Basin Fruitland Coal
	11. County or Parish, State Rio Arriba, N.M.

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<b>Drilling Permit Extension</b>
	(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 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.)\*

Request that drilling permit granted on 8/26/91 be extended for a six-month period.

FEB 26 1992

RECEIVED  
AUG 1 1992  
OIL CON. DIV.  
DIST. 2

APPROVED  
AUG 19 1992  
AREA MANAGER

RECEIVED  
BLM  
92 AUG 17 PM 1:10  
OIS FARMINGTON, N.M.

14. I hereby certify that the foregoing is true and correct.  
Signed Mark N. Stephenson Title Manager, Production-Regulatory Affairs Date 8/12/92

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any: