

**UNIT STATES N. M. OIL & GAS COMMISSION**  
**DEPARTMENT OF THE INTERIOR**  
**BUREAU OF LAND MANAGEMENT**  
**MARBLE FALLS, NEW MEXICO 88240**

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  GAS WELL  OTHER

2. NAME OF OPERATOR  
C.W. Trainer

3. ADDRESS OF OPERATOR  
Route 3, Box 607 Marble Falls, TX 78654

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
  
554' FSL, 554 FEL Section 25

14. PERMIT NO. \_\_\_\_\_ 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3855.1' GL

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
NM 19448

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Dorothy

9. WELL NO.  
#1

10. FIELD AND POOL, OR WILDCAT  
Undes, EK Bone Springs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 25, T-18S, R-33E

12. COUNTY OR PARISH 13. STATE  
Lea 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) Set production casing <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.)\*

10-31-83 Spudded with cable tool rig.

03-06-84 Moved in Rotary Rig. Commenced drilling 17" hole.

03-07-84 Ran 370' of 13 3/8" casing, cemented with 375 sacks cement.

03-15-84 Set 3691' of 8 5/8" casing, cemented with 1000 sacks cement.

04-06-84 TD 10,518'. Running WeLex Logs, compensated density Dual spaced Neutron Log & Dual Induction Guard Log.

04-07-84 Running 5 1/2" 23# N80 8rd thd production casing. 239 jts. 10,040'. Used Halliburton float shoe & float collar and 15 centralizers spaced from bottom to 9350'. Halliburton cemented with 475 sacks 50/50 pozmix class H, 2% gel, .6 of 1% Halad 22 and 3 lbs. KCL/sack. Cement calculated to fill back to 8000' plus 30% excess. Plug down 12:00 Noon, 4-7-84.

RECEIVED  
APR 09 9 31 AM '84

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

SIGNED *Peter W. Chester* TITLE Agent DATE 4-11-84

(This space for Federal or State Office use)

APPROVED BY PETER W. CHESTER TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: APR 13 1984

\*See Instructions on Reverse Side

RECEIVED

APR 17 1984

O.C.D.  
HOBBS OFFICE