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NM OIL CONS COMMISSION
Drawer DD
Artesia, NM 88210

Form 3160-5
June 1990

RECEIVED

FEB 9 10 59 AM '94

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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

5. Lease Designation and Serial No.
NM 0442882

6. If Indian, Ailotee or Tribe Name

7. If Unit or CA, Agreement Designation
Burton Flat Deep

8. Well Name and No.
Burton Flat Deep Unit #9

9. API Well No.
30-015-20960

10. Field and Pool, or Exploratory Area
Burton Flat Wolfcamp

11. County or Parish, State
Eddy, NM

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
General Atlantic Resources, Inc.

3. Address and Telephone No.
410 17th Street, Suite 1400, Denver, CO 80202

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 35, T20S, R28E
Unit Letter E, 1980' FNL, 660 FWL

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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 checked="" 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 type="checkbox"/> Other <u>Temporarily Abandon</u>
	<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
	<input type="checkbox"/> Dispose Water

(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.)*

POH w/tbg and pkr. Set CIBP ~~99640'~~^{9460'} w/35' cmt. Well Temporarily Abandoned.

J. Lara
1994

14 I hereby certify that the foregoing is true and correct

Signed Robert D. Mowry Title Senior Operations Eng Date 2/7/94

This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and wulfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.