

UNITED STATES NM Oil Cons. Commission
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Albuquerque, NM 88210

Form approved:
Budget Bureau No. 1004-1
Expires August 31, 1985
5. LEASE DESIGNATION AND SERIAL
NM 38343

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.)

RECEIVED

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐
2. NAME OF OPERATOR Sanders Petroleum Corporation
3. ADDRESS OF OPERATOR Post Office Box 2014, Roswell, NM 88201
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1980' FSL & 660' FWL
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, CR, etc.)
3765

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Michael Eric
9. WELL NO.
#2
10. FIELD AND POOL OR WILDCAT
Undesignated Abo
11. SEC., T., R., M., OR BLM. AND
SURVEY OR AREA
Sec. 22-7S-26E
12. COUNTY OR PARISH 13. STATE
Chaves NM

16 Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) change in address X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
(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.)

Effective 7/1/89 Sanders Petroleum Corporation has had a change in address from 2501 Juan Tabo, NE, Suite 2, Albuquerque, NM 87112 to Post Office Box 2014, Roswell, NM 88201.

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

SIGNED Theresa Rodriguez TITLE Production Analyst
(This space for Federal or State office use)

DATE 8/28/89

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

ACCEPTED FOR RECORD
PETER W. CHESTER
DATE

AUG 30 1989

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side