

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
NEW MEXICO
ARTESIA, NM 88210

Form approved.
Budget Bureau No. 1004-013
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.)		5. LEASE DESIGNATION AND SERIAL NO NM-18821
1. OIL <input type="checkbox"/> GAS <input type="checkbox"/> WELL <input type="checkbox"/> WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DRY HOLE <input type="checkbox"/>	RECEIVED BY MAR 05 1986 O. C. D. ARTESIA, NM	6. IF INDIAN, ALLOTTEE OR TRIBE NA
2. NAME OF OPERATOR Read & Stevens, Inc. ✓		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR P.O. Box 1518, Roswell, NM 88201		8. FARM OR LEASE NAME NORTH HAYSTACK FEDERAL
4. LOCATION OF WELL (Report location clearly and in accordance with State requirements.* See also space 17 below.) At surface 660' FNL and 660' FWL		9. WELL NO. 3
14. PERMIT NO. 30-005-61602	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3943' GR	10. FIELD AND POOL, OR WILDCAT Wildcat Abo
		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34-5S-26E
		12. COUNTY OR PARISH Chaves
		13. STATE NM
16. Check Appropriate Box To Indicate Nature of Notice, Report, Other Data		

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other)

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<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.)*

6-6-85 RU plugging unit, prep to P&A.

6-7-85 Set CIBP @ 4400', dump 35' cmt on top of plug, trip in w/tbg, SDON.

6-10-85 Circ hole w/salt gel mud, cut csg @ 1538'; spot 25sx Class "C" cmt 1405'-1543'; spot 50sx plug @ 8 5/8" csg shoe 1050'-1150'; tagged plug @ 1010', ran tbg to 96', pump 25sx surface plug 0'-96', install dry hole marker, cut deadmen & prep to clean loc.

I hereby certify that the foregoing is true and correct

SIGNED

[Signature]

TITLE Drilling & Production Manager

DATE 6/10/85

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
PETER W. CHESTER

TITLE

DATE

MAR 3 1986

*See Instructions on Reverse Side

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

Post ID-2
8-30-85
P&A

