

UNITED STATES DRAWER DD  
DEPARTMENT OF THE INTERIOR, NM 88211  
BUREAU OF LAND MANAGEMENT

Budget Bureau No. 1004-1-104  
Expires August 31, 1985  
5. LEASE DESIGNATION AND SERIAL  
NM36408 / RNM 123  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 DEKALB Energy Company  
3. ADDRESS OF OPERATOR 1625 Broadway - Denver, CO 80202  
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below)  
At surface  
660' FNL & 1980' FWL (NE NW)  
14. PERMIT NO API 30-005-61761-10  
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3759' GR

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OCT - 3 1991

O. C. D.  
ARTESIA OFFICE

7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME Rose Federal Com  
9. WELL NO. 12  
10. FIELD AND POOL OR WILDCAT Pecos Slope Abo  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 21, T5S-R25E  
12. COUNTY OR PARISH Chaves  
13. STATE New Mexico

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) ☐

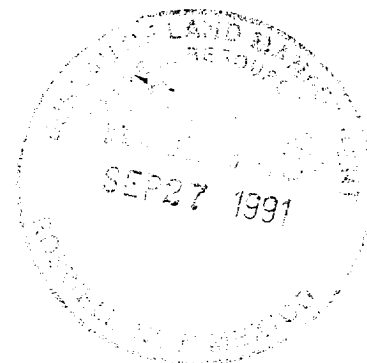
SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐  
FRACTURE TREATMENT ☐ ALTERING CASING ☐  
SHOOTING OR ACIDIZING ☐ ABANDONMENT\* ☐  
(Other) Off Lease Measurement Apprvl XX

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.)

DEKALB Energy requests approval for off lease measurement. The sales point is located at the Alkili #4 lease, NW NW Section 22, T5S-R25E.



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

SIGNED Al Flower TITLE District Superintendent DATE Sept. 18, 1991

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

APPROVED  
DATE PETER W. CHESTER

OCT 1 1991

\*See Instructions on Reverse Side