

RECEIVED BY
(N.M. 9-331)
Formerly 9-331)

JAN 29 1985

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
NM 29207

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Cobie Ebeid Federal Com

9. WELL NO.
#2

10. FIELD AND POOL, OR WILDCAT
Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 13, T-8-S, R-25-E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

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. ARTESIA, OFFICE
OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Stevens Operating Corporation

3. ADDRESS OF OPERATOR
P. O. Box 2203, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1980 FNL, 660 FEL, Sec. 13, T-8-S, R-25-E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3586.5 GR

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"/>	PCLL 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) <u>Name Change, Perfs.</u> <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

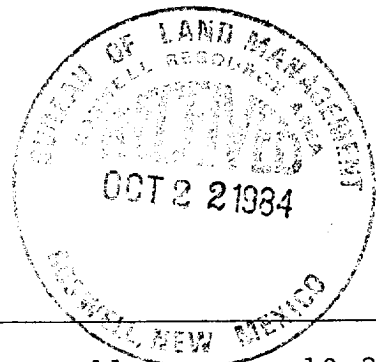
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Please correct your records to include "Com" for the Cobie Ebeid Federal #2 well. The correct name is Cobie Ebeid Federal Com #2.

Also please note a correction on the originally submitted perfs. The correct perforations on this well are:

3872, 74, 76, 78, 87, 4032, 32.5, 34, 36, 37, 38, 40, 4137, 40, 41, 42, 44, 45, 46 and 50, 4187.5, 90, 91 and 92.

The communitization agreement number on this well is SCR 450.



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

SIGNED Peter W. Chester TITLE Production Controller DATE 10-21-84

(This space for Federal APPROVED (Orig. Sgd.) PETER W. CHESTER

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JAN 25 1985

*See Instructions on Reverse Side