

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

Budget Bureau No. 1004-0135
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 formation. Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. FED OGL LC-068127	
2. NAME OF OPERATOR BRANEX RESOURCES, INC., f/k/a Bran Oil Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 2328, Roswell, NM 88202-2328		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1880' FSL & 1880' FWL, Unit letter K		8. FARM OR LEASE NAME Union "33" Federal	
14. PERMIT NO. API #30-005-62724		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3697' GL		10. FIELD AND POOL, OR WILDCAT Pecos Slope Abo	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33, T6S-R26E, NMPM	
		12. COUNTY OR PARISH Chaves	13. STATE NM

NOV 20 '89

O. C. D.
ARTESIA, OFFICE

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>
(Other) Conductor and casing <input type="checkbox"/>	XX

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <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.) *

10/15/89: Spud 17½" hole and set 92' of 13 3/8" conductor pipe. Circulated conductor pipe with 130 sx Halliburton "Premium Plus" cement with 2% CaCl.

10/16/89: Drilled a 12¼" hole to 801'. Ran 21 joints (784') of 8 5/8" 24# new API pipe with Insert Float, cement nosed guide shoe and centralizers. Cemented 8 5/8" pipe with 225 sx Halliburton "Lite" and 200 sx Halliburton "Premium Plus" with 2% CaCl, circulated 75 sx to surface. Plug down at 11:45 pm 10/16/89. WOC and tested casing and BOP to 1000 psi.

10/25/89: Drilled a 7 7/8" hole to 4250'. Ran 109 joints (4225') of 4½" J-55 used tested pipe with float collar, cement nosed guide shoe and 10 centralizers. Cemented pipe with 350 sx Halliburton "Premium Plus" poz mix, 5# salt, 4/10% Halide 4, 3/10% CFR 3. Plug down at 6:00 am. Estimated top of cement 2800'.

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

SIGNED Phelps White IV TITLE Engineer DATE 10/31/89
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

FILED FOR RECORD
DATE NOV 16 1989
W. CHESTER

*See Instructions on Reverse Side