Ma Onl Const. Commission Drawer DD Artesia, MI 88210

Form 3160-5

UNITED STATES

FORM APPROVED

Budget Bureau No. 1004-0135

Leave Decignation and	Serial No.
Expires: March :	31, 1993
Budget Bureau No.	1004-013

(June 1990)	D D1	IT OF THE INTERIOR	Expires: March 31, 1993
	BUREAU OF	LAND MANAGEMENT	5. Lease Designation and Serial No.
Do not use this f	orm for proposals to dr	AND REPORTS ON WELLS fill or to deepen or reentry to a different reservoir. R PERMIT—" for such proposals	NM 62182 6. If Indian, Allottee or Tribe Name
	7. If Unit or CA, Agreement Designation		
1. Type of Well Oil Well Well Well	Other	FEB 2 3 1994	8. Well Name and No.
2. Name of Operator			ROSILEE FEDERAL #1
TOPAT OIL C	ORPORATION		9. API Well No.
3. Address and Telephone	No.		
505 N. BIG	SPRING, STE. 204,	MIDLAND, TX 79701 (915)682-6340	10. Field and Pool, or Exploratory Area
4. Location of Well (Foots	age, Sec., T., R., M., or Survey D	escription)	COYOTE (QUEEN)
2310 FWL, 2	310 FNL SEC. 20 T	-11-S, R-27-E	11. County or Parish, State
			CHAVES COUNTY, NM
12. CHECK	APPROPRIATE BOX	s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF	SUBMISSION	TYPE OF ACTION	
Notice	of Intent	Abandonment	Change of Plans
_		Recompletion	New Construction
LX Subseq	uent Report	Plugging Back	Non-Routine Fracturing
_		Casing Repair	Water Shut-Off
Final A	Abandonment Notice	Altering Casing	Conversion to Injection
		X Other CASING CMT. REPORT	Dispose Water
			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
		the state of the s	a server proceed work. If well is directionally drilled

13. 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.)*

11/23/93 SET 215' 8 5/8" 24# J55 SURFACE CASING IN 11" HOLE. CEMENTED WITH 125 SX CLASS "C" CEMENT, 1# FLOCES/SX, 2% CaCL. TOP OF CEMENT 40' FROM SURFACE.



		A STATE OF THE STA	
14. I hereby certify that the foregoing is true and correct Signed James Al Comments	ODERATOR R	EPRESENTATIVE 2/17/94	
(This space for Federal or State office use)	Title OPERATOR R	pale	7
Approved by	Title	Date	
		FEB 22 1394	!
Title 18 U.S.C. Section 1001, makes it a crime for any per or representations as to any matter within its jurisdiction.	erson knowingly and willfully to make to any	department or agency of the United States any false, fictitious or fraudulent	statements
	*See Instruction on Re	rerse Side	