

UNITED STATES **Artesia** **88210** **APPLICATE**
DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)
BUREAU OF LAND MANAGEMENT

Form approved.
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 reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Mechanical Integrity Test		7. UNIT AGREEMENT NAME Sulimar Queen Unit	
2. NAME OF OPERATOR Tech Oilfield Research Corporation		8. FARM OR LEASE NAME Tract IV	
3. ADDRESS OF OPERATOR P.O. Drawer 730, Roswell, N.M. 88202		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface A 330' FNL & 330' FEL		10. FIELD AND POOL, OR WILDCAT Sulimar Queen	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 26-T15S-R29E	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3920' GR		12. COUNTY OR PARISH Chaves	
		13. STATE NM	

16. 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 PLANS <input type="checkbox"/>
(Other) <u>RULE 203</u>	

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) _____	

(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.)*

1. Pulled Tbg. & Rods.
2. Ran Packer to 1880' & loaded hole with Packer Fluid.
3. Tested Csg. to 500# PSI for 30 min. (Holding)
4. Test chart is with Sundry.
A. Test witnessed by the O.C.D., Gary Williams.

Since Rule 203 for T.A. has been complied with, New Mexico Tech is requesting a five (5) year extension.

This Approval of Temporary
Abandonment Expires 7/97



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

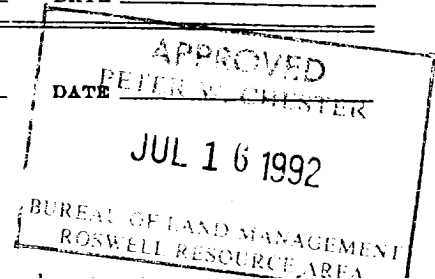
SIGNED Mitch Lee TITLE Agent

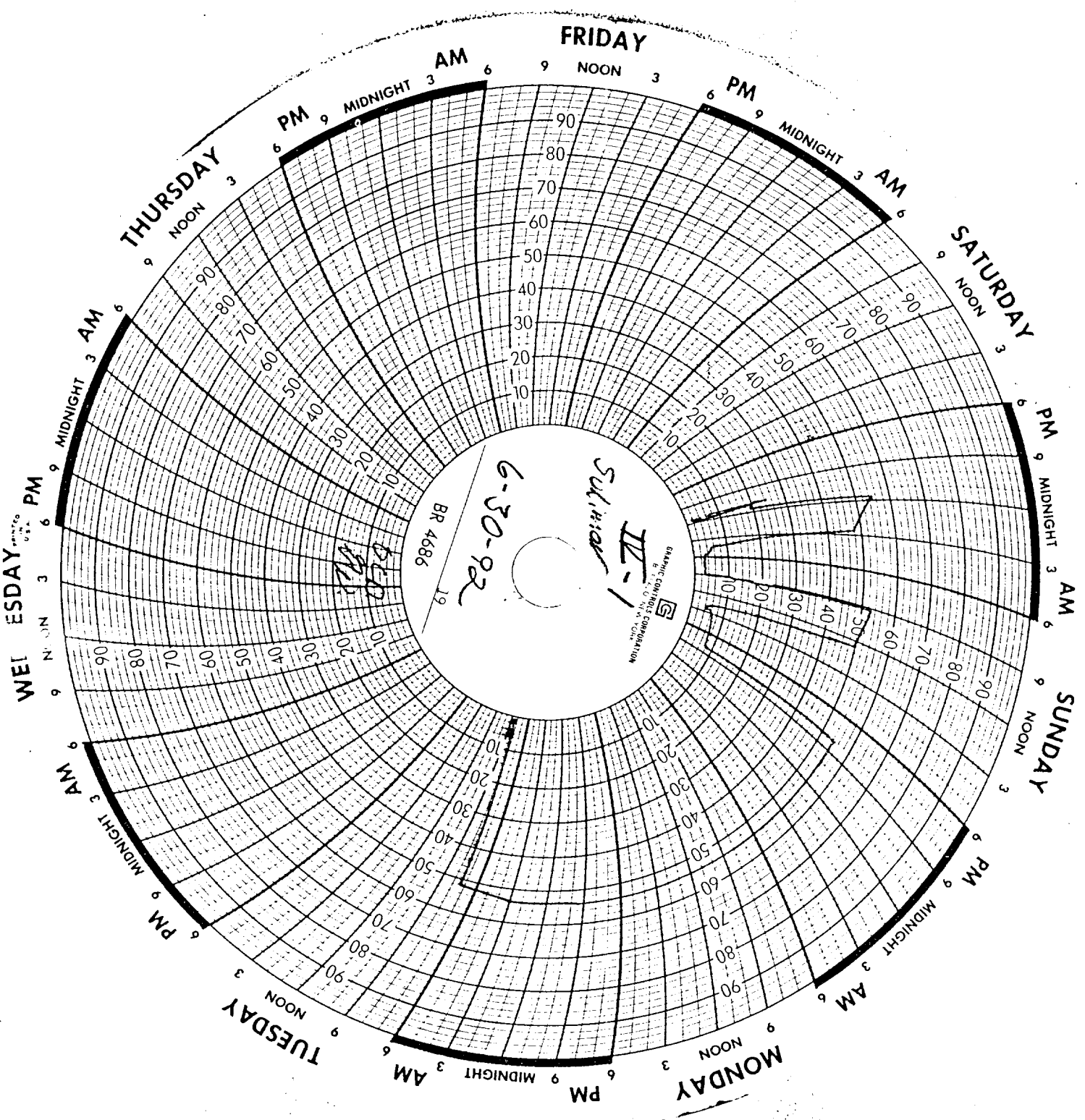
DATE 7-7-92

(This space for Federal or State office use)

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

APPROVED FOR 12 MONTH PERIOD
ENDING JUL 16 1993
*See Instructions on Reverse Side





BR 4686

6-30-92

IL-1

GRAPHIC CONTROLS CORPORATION
B-100 N. 10th St.
MILWAUKEE, WIS. 53233