

451

Form 3160-5
 (December 1989)

UNITED STATES
 DEPARTMENT OF THE INTERIOR
 BUREAU OF LAND MANAGEMENT

FORM APPROVED
 Budget Bureau No. 1004-0135
 Expires: September 30, 1990

5. Lease Designation and Serial No.
NE Square Lake state

6. If Indian, Allottee or Tribe Name
 E 5300

7. If Unit or CA, Agreement Designation
 NE Square Lake Unit

8. Well Name and No.
 NE Square Lake #8

9. API Well No.
 30-015-~~8829~~ 04785

10. Field and Pool, or Exploratory Area
 NE Square Lake

11. County or Parish, State
 Eddy, NM

SUNDRY NOTICES AND REPORTS ON WELLS
 Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
 Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

FEB 15 1994

1. Type of Well
 Oil Well Gas Well Other Injection well

2. Name of Operator
 Evergreen Operating Corporation

3. Address and Telephone No.
 1512 Larimer St. #1000, Denver, CO 80202 (303) 534-0400

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 660' FSL, 660' FWL, Sec. 2-T16S-R31E

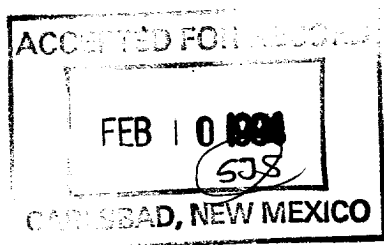
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection Temporary Abandonment <small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</small>

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.)

This well was shut in April, 1991.

An evaluation of procedures and expenses required to bring this unit back to economic levels is currently underway.



JAN 10 11 31 AM '94
 RECEIVED

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

Signed *Stephanie Basery* Title Petroleum Engineer Date 12/29/93

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
 Conditions of approval, if any:

Title 18, U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.