

U.S. DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
OTHER INSTRUCTIONS TO
BUREAU

LEASE DESIGNATION AND SERIAL NO.
LC-050797

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.)

1. NAME OF OPERATOR
Timothy D. Collier

2. ADDRESS OF OPERATOR
P. O. Box 798, Artesia, New Mexico 88211-0798

3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

996 FSL and 1005 FWL of Section 13, Township
20 South, Range 28 East.

14. PERMIT NO. 17. ELEVATIONS (Show whether DE, RT, GR, etc.)

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

NOTICE OF INTENTION TO		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRAC TURE TREAT	MULTIPLE COMPLETION	FRAC TURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	OTHER	

(Other) Change in Ownership (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 and 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.)

Former operator: Barber Oil, Inc.
P. O. Box 1658
Carlsbad, New Mexico 88220

Post ID-3
11-14-86
chz op

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

SIGNED *Timothy D. Collier*
(This space for Federal or State office use)

TITLE Operator

DATE 10-01-86

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

AGGEPTEED FOR RECORD

AP
OCT 03 1986

*See Instructions on Reverse Side