

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

John H. Trigg

3. ADDRESS OF OPERATOR

Box 520, Roswell, NM 88201

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

At surface

660' FNL & 990' FEL

RECEIVED BY

JUN 16 1986

O. C. D.

ARTESIA, OFFICE

5. LEASE DESIGNATION AND SERIAL NO.

NM-06299

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR RANGE NAME

Federal M

9. WELL NO.

2

10. FIELD AND POOL, OR WILDLIFE

Dos Hermanos - Y-5R

11. SEC., T., R., M., OR ALL, AND SURVEY OR AREA

33-20-30

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3343' GR

12. COUNTY OR PARISH

Eddy

13. STATE

NM

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANE

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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. Run bond Log & set CIBP @ 1600' w 50' cmnt.

2. Set solid cmnt plug across salt sec from 1450' to 450' (R-111A Potash)

3. Set 50' surface plug & dry hole marker

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

SIGNED X

TITLE

Production Forman

DATE 6/12/86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE 6-13-86

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side