

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

45F

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a storage reservoir. Use "APPLICATION FOR PERMIT" for such proposals.)

RECEIVED BY
O. C. D.
ARTESIA, OFFICE
OCT 12 1984

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR: FLORIDA EXPLORATION CO ✓

3. ADDRESS OF OPERATOR: 3151 S. VAUGHN WAY #200 AURORA COLO 80014

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface: 780' FNL + 1350' FEL

5. LEASE DESIGNATION AND SERIAL NO.: NM-53219

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME: Chama FED COMM

9. WELL NO.: 1

10. FIELD AND POOL, OR WILDCAT: UNDESIGNATED

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: SEC 11-T225-R24E

12. COUNTY OR PARISH: Eddy

13. STATE: NM

14. PERMIT NO.

15. ELEVATIONS (Show whether DV, ST, OR, etc.): 4095' G.L.

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 checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

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) <input type="checkbox"/>	

(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 names pertinent to this work.)

WE REQUEST PERMISSION TO DRILL TO A TOTAL DEPTH OF 10900'. ORIGINAL PERMIT DEPTH WAS 9000'.



I hereby certify that the foregoing is true and correct

SIGNED: Harold D. Bentley TITLE: Operations Manager DATE: 10/11/84

(This space for Federal or State office use)

APPROVED BY: _____ TITLE: _____ DATE: 10-26-84

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side