

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions
verse side)

Budget Authority No. 1004-01-0
Expires August 31, 1985

458

3. LEASE DESIGNATION AND SERIAL NO

NM-34246

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

PFI Amoco 19 Federal

9. WELL NO.

3Y

10. FIELD AND POOL OR WILDCAT

Filaree Dome (Delaware)

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

Sec. 19, T22S, R26E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

SUNDRY NOTICES AND REPORTS ON WELLS

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

RECEIVED

APR 18 '89

C. D. ARTESIA OFFICE

OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

Geodyne Resources Inc.

3. ADDRESS OF OPERATOR

415 W. Wall, Suite 1300, Midland, Texas 79701

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

At surface

1831' From the North Line and 2577' From the East Line.

14. PERMIT NO

API 30-015-25912

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

GL 3385'

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

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) CHANGE OF OPERATOR

(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.)

Effective March 1, 1989, Geodyne Resources Inc. is the new operator of this well. This well was formerly operated by Primary Fuels, Inc.

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

SIGNED

James B. Sellers
James B. Sellers

TITLE

Engineer

DATE

4/14/89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED