DATE

MAT

2 0 1999

District Office				
DISTRICT I	OIL CONSERVATION	ON DIVISION		
P. O. Box 1980, Hobbs, NM 88240	2040 South Pacheco		WELL API NO.	
1, 1, 201 1, 100 1, 111 00210	Santa Fe, New Mexico 86595		30-025-34525	
DISTRICT II	,		5. Indicate Type	of Lease
P. O. Drawer DD, Artesia, NM 88210		÷		STATE X FEE
DISTRICT III		-	6. State Oil & Ga	as Lease No.
1000 Rio Brazos Rd., Aztec, NM 87410		ĺ		
SUNDRY NOTICES	AND REPORTS ON WELL	.S		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO			7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT			tenha	
	FOR SUCH PROPOSALS)		LAUBE	
1. Type of Well:		ļ	State "2"	
Oil Gas Well Well X	OTHER	İ		
2. Name of Operator			8. Well No.	
TMBR/Sharp Drilling, Inc.	<u> </u>		11	<u> </u>
3. Address of Operator			9. Pool name or W	ildcat
P. O. Drawer 10970, Midland, TX	79702		Shoebar; At	oka (Gas)
4. Well Location	n n Couth		2240	The Mont
Unit Letter K : 1783	Feet From The South	Line and	2310 Feet Fi	rom The West
Section -32 2	77.5 Township 468 Rans	re 35E NMPI	м с	County Lea
10. Elevation (Show whether DF, RKB, RT, GR, etc.)				
11. Check Appr	3956' opriate Box to Indicate Na		ert or Other Dat	
NOTICE OF INTEN	•		SSEQUENT RE	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDON		
PULL OR ALTER CASING		CASING TEST AND CE	EMENT JOB X	
OTHER:		OTHER:	<u> </u>	
12. Describe Proposed or Completed Operations (Tearly state all nortinent details, and	give pertinent dates, includi	ng estimated date of st	arting any proposed
work) SEE RULE 1103.	realty state all personal debattor and	give permitted assess the second		
05/09/99 Ran 113 jts (88 jts	K-55 & 25 jts HCK-55) 8-5/8	3" 32# STC csg & set	t @ 5000'. Total	pipe 5015'.
	_			CI C containing 1% CaCl2
CaCl2. Plug down	@ 2:45 PM. Circ 340 sx c	mt to reserve. WOC	14-3/4 hrs. Test	csg to 1500 psi.
I hereby certify that the information above is true and co	mplete to the best of my knowledge and beli	ef.		
SIGNATURE A A	Phly TITLE	Vice President	DATE	05/11/99
7/10				
TYPE OR PRINT NAME JETTrey D.	Phillips		TELEPHON	IE NO. (915) 699-5050

(This space for State Use)

APPROVED BY