

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions
reverse side)

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 57713

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR LAYTON ENTERPRISES, INC.
3. ADDRESS OF OPERATOR 3103 79TH ST LUBBOCK, TEXAS 79423
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface 660' FNL 660' FEL
SEC 11, T 9 S, R 36 E

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

EL ZORRO "C" FEDERAL

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

ALLISON PENN

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

SEC 11, T 9 S, R 36 E

14. PERMIT NO.

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

4044 GL

12. COUNTY OR PARISH

LEA

13. STATE

NM

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) DRILL OUT ☒

(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.)*

MOVED IN ROTARY DRILLING EQUIPMENT - INSTALLED
WELL HEAD - DRILLED OUT CEMENT PLUGS AND WASHED
TO 9600 - TESTED CASING TO 1000 PSI - 30 MIN - OK.
DRILLED BOTTOM PLUG AND CLEANED OUT TO TD 9719.
INTEND TO ACIDIZE PERFS 9698-9714 W/ 500 GAL
15% HCL ACID - EQUIP WELL WITH PUMPING EQUIPMENT
AND PLACE WELL ON PRODUCTION

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

SIGNED

Ronald L. Layton

TITLE

PRESIDENT

DATE

5-10-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

SJS

CARLTON, TX 79401