

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. OR CONS. COMMISSION  
P.O. BOX 980  
HOBBS, NEW MEXICO 88240

APPROVED  
Budget Bureau No. 1004-0135  
Expires: September 30, 1990

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
**Discovery Operating, Inc.**

3. Address and Telephone No.  
**800 N. Marienfeld, Suite 100, Midland, Tx 79701 (915) 683-5203**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**Sec. 5, T9S, R35E  
2130 FSL & 660 FWL**

5. Lease Designation and Serial No.  
**NM 71790**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
**Federal 5 #1**

9. API Well No.  
**30-025-31925**

10. Field and Pool, or Exploratory Area  
**Vada (Penn)**

11. County or Parish, State  
**LEA, NM**

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other

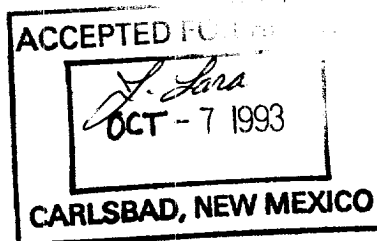
- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection

**Set surface casing**

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

**8/30/93 15 joints of 13 3/8" surface casing was set at 375' with 380 sacks Class "C" cement + 2 % CaCl<sub>2</sub>. Circulated cement to surface. Plug down at 9:00 PM.**



SEP 3 11 53 AM '93  
CARLSBAD AREA

RECEIVED

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

Signed [Signature] Title **Engineer**

Date **9/1/93**

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: