

NM 58537

Irex Federal

1

Allison Penn

Sec. 20, T-8-S, R-37-E

Roosevelt

N.M.

1. OIL ☒ GAS ☐ OTHER ☐
WELL

2. NAME OF OPERATOR

Petroleum Production Management, Inc.

3. ADDRESS OF OPERATOR

Suite 200/Sutton Place Bldg. Wichita, Kansas 67202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

Unit N

1980' FWL & 660' FSL

14. PERMIT NO.

30-041-00178

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

4051' DF

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐
☐

PULL OR ALTER CASING

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☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

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☐
☒

(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 at 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.)*

3-20-92--Spotted 25 sacks of cement at 5742'. Tagged at 5531'.

Loaded hole with with 9.5# mud.

Spotted 75 sacks of cement at 4265'. Tagged at 4103'.

Spotted 50 sacks of cement at 4008'. Tagged at 3850'.

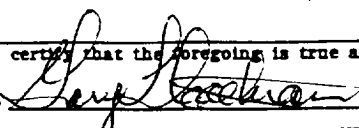
Spotted 50 sacks of cement at 2383'-2250'.

3-23-92--Spotted 25 sacks of cement forming a 50' plug at surface.

Installed dry hole marker and cleaned location.

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

SIGNED



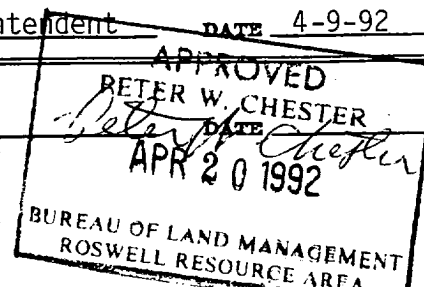
TITLE District Superintendent

DATE 4-9-92

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

Approved as to plugging of the well bore,
Liability under bond is retained until
surface restoration is completed,

*See Instructions on Reverse Side