

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N. M. OIL CONS. COMMISSION
HOBBS, NEW MEXICO 88240

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(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

FINA OIL & CHEMICAL COMPANY

3. ADDRESS OF OPERATOR

Box 2990, Midland, TX 79702-2990

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

990' FSL & 2248.74' FEL, Sec. 30, (Unit 0, SW/4 SE/4)

14. PERMIT NO.

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

4224 RDB

5. LEASE DESIGNATION AND SERIAL NO.

API 30-041-10109 0145695

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Horton Federal

9. WELL NO.

13

10. FIELD AND POOL, OR WILDCAT

Milnesand San Andres

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

30-8-35 NMPM

12. COUNTY OR PARISH 13. STATE

Roosevelt

New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

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*

(Other) Request Shut In Status

(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.)*

Non-commercial well - Request Shut In Status under current oil pricing; waiting to try completion in lower zones. Capped off with valve shut in on well head.

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

SIGNED

Neva Herndon

TITLE Senior Production Clerk

DATE 11-09-88

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PETER S. CHESTER
DATE

NOV 14 1988

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side