

N. M. OIL CONS. COMMISSION
P. O. BOX 1960
UNITED STATES HOBBS, NEW MEXICO 88240
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-83197
2. Name of Operator Orbit Enterprises, Inc.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Box 476 Lovington, NM 88260-0476 (505)396-4914	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FSL & 660' FWL, Sec 28, T7S, R33E	8. Well Name and No. Farrell Federal #1
	9. API Well No. 30-041-10125
	10. Field and Pool, or Exploratory Area Chaveroo San Andres
	11. County or Parish, State Roosevelt, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>return to production</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form 1)

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.)*

PULL AND REPLACE ALL THAT IS NEEDED
TO RETURN TO PRODUCTION BY JULY 29, 1995

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

Signed Joe Sanders Title Pres. Date June 29, 1995

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____

JUL 14 1995

BUREAU OF LAND MANAGEMENT
NEW MEXICO
RANGE RESOURCE AREA

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side