

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

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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Mims Texas Oil & Gas Co.		8. FARM OR LEASE NAME Federal	
3. ADDRESS OF OPERATOR Box 13, Milnesand, N.M. 88125		9. WELL NO. #2, #4, #5, #6	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  See #17		10. FIELD AND POOL, OR WILDCAT Chaveroo San Andres	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, OR, etc.)	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA See # 17		12. COUNTY OR PARISH Roosevelt	
		13. STATE N.M.	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other)		(Other) Started production	

(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.)\*

This notice is a correction of 7-31-89.  
The following wells are now producing:

#2 27SWSE T 7S R 33E

#4 27NESW T 7S R 33E

#5 27NWSE T 7S R 33E

#6 27NESE T 7S R 33E

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

SIGNED Quirre Luman

TITLE Agent

DATE 8-30-89

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

ACCEPTED FOR RECORD  
PETER W. CHESTER  
DATE

SEP 6 1989

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

\*See Instructions on Reverse Side