

N. M. Oil and Gas Commission  
P. O. BOX 1980  
HOBBS, NEW MEXICO 88241

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
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<br><input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | 5. Lease Designation and Serial No.<br>31 NM-83197             |
| 2. Name of Operator<br>Orbit Enterprises, Inc.                                                                                   | 6. If Indian, Allottee or Tribe Name<br>ROOSEVELT              |
| 3. Address and Telephone No.<br>c/o Oil Reports & Gas Services, Inc., P. O. Box 755, Hobbs, New Mexico 88241                     | 7. If Unk or CA, Agreement Designation                         |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>660' FNL & 660' FEL, Sec 28, T7S, R33E                 | 8. Well Name and No.<br>Farrell Federal #16                    |
|                                                                                                                                  | 9. API Well No.<br>30-041-10434                                |
|                                                                                                                                  | 10. Field and Pool, or Exploratory Area<br>Chaveroo San Andres |
|                                                                                                                                  | 11. County or Parish, State<br>Roosevelt, NM                   |

| 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA |                                                                |                                                                                                       |
|----------------------------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| TYPE OF SUBMISSION                                                               | TYPE OF ACTION                                                 |                                                                                                       |
| <input type="checkbox"/> Notice of Intent                                        | <input type="checkbox"/> Abandonment                           | <input type="checkbox"/> Change of Plans                                                              |
| <input checked="" type="checkbox"/> Subsequent Report                            | <input type="checkbox"/> Recompletion                          | <input type="checkbox"/> New Construction                                                             |
| <input type="checkbox"/> Final Abandonment Notice                                | <input type="checkbox"/> Plugging Back                         | <input type="checkbox"/> Non-Routine Fracturing                                                       |
|                                                                                  | <input type="checkbox"/> Casing Repair                         | <input type="checkbox"/> Water Shut-Off                                                               |
|                                                                                  | <input type="checkbox"/> Altering Casing                       | <input type="checkbox"/> Conversion to Injection                                                      |
|                                                                                  | <input checked="" type="checkbox"/> Other Return to Production | <input type="checkbox"/> Dispose Water                                                                |
|                                                                                  |                                                                | (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.)\*

8/4/94 RU, pulled old prod. equip.  
changed pump, tested tbg  
back in the hole, replaced  
rods & tbg as necessary  
Well returned to production  
Test to follow

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

Signed

Title Agent

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

ACCEPTED FOR RECORD  
PETER W. CHESTER

Date 8/8/94

AUG 30 1994

Date

BUREAU OF LAND MANAGEMENT  
ROOSEVELT RESERVE 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