

P. O. BOX 1980
HOBBS, N.M. 88240
DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPL
(Other Instructions
verse side)

Form approved.
Budget Bureau No. 42 R1424.

GEOLOGICAL SURVEY

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Darrell Jackson & Richard Donald Murphree		8. FARM OR LEASE NAME Mountain Federal	
3. ADDRESS OF OPERATOR c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, NM 88241		9. WELL NO. 4	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 990' FNL & 1980' FEL of Sec. 30		10. FIELD AND POOL, OR WILDCAT Tomahawk San Andres	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T7S, R32E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4421 KB		12. COUNTY OR PARISH Rossevelt	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

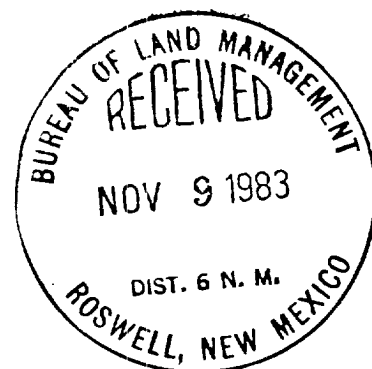
SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Squeeze & Reperf <input checked="" type="checkbox"/>	

(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.) *

Work began 10/10/83. Set retainer at 4104 & squeezed perfs 4120-56 with 300 sacks cement. Perforated 4048-81 & treated with 3,000 gallons 15% acid & 1,000 gallons 20% acid. 10/30/83 pumped 90 bbls oil, 70 bbls water, 65 MCF gas 24 hours.



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

SIGNED Donna Hall TITLE Agent DATE 11/7/83

(This space for Federal or State RECORD)

APPROVED BY PETER W. LIPSTER TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

MAY 16 1984

*See Instructions on Reverse Side