

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

P.O. Box 1000  
Hobbs, N.M. 88241

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 Oil <input type="checkbox"/> Gas <input type="checkbox"/> <input checked="" type="checkbox"/> Well <input type="checkbox"/> Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. <b>NM-36486</b>
2. Name of Operator <b>STRATA PRODUCTION COMPANY</b>	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. <b>P.O. Box 1030 Roswell, New Mexico 88202-1030 505-622-1127</b>	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>660' FSL &amp; 620' FWL Section 31-7S-32E</b>	8. Well Name and No. <b>Gallina Federal #1</b>
	9. API Well No. <b>30-041-20702</b>
	10. Field and Pool, or Exploratory Area <b>Tomhawk San Andres</b>
	11. County or Parish, State <b>Roosevelt County, NM</b>

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 checked="" 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 <b>Place on Production</b>
	<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.)

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.)\*

Started producing September 25, 1996. Produced nine (9) hours. Shut-in due to water disposal problems. Trucked water loads. Started producing September 30, 1996.

The well was shut-in due to the Salt Water Disposal well which has not been operational and apparently abandoned. The well can not be commercially produced without a water disposal system.

Arrangements with another water disposal system must be negotiated and constructed.

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

Signed Carol J. Barcia

Title Production Records Manager

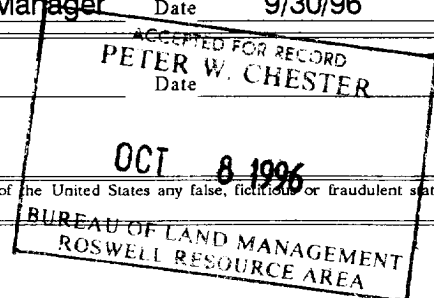
Date 9/30/96

(This space for Federal or State office use)

Approved by

Title

Conditions of approval, if any:



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