

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
NM-57708

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
MWJ 26 FEDERAL

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Vada-Penn

11. SEC., T., R., M., OR BLK. AND
SURVEY OR ALBA
Sec 26, T-8S, R-36E

12. COUNTY OR PARISH
Roosevelt

13. STATE
New Mexico

1. OIL ☒ GAS ☐ OTHER ☐
WELL WELL

2. NAME OF OPERATOR
MWJ PRODUCING COMPANY

3. ADDRESS OF OPERATOR
400 W. Illinois - Suite 1100 Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FNL & 760' FWL Section 26

14. PERMIT NO.
API #30 041 20804

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4072' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) ☐

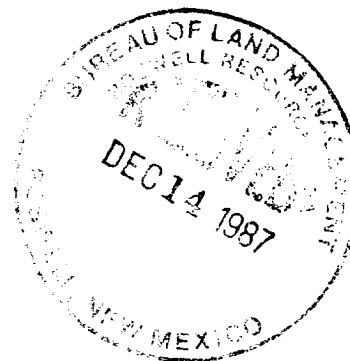
SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☒
(Other) Put on 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.)*

12/1/87: Ran pump and rods.
12/2/87: Set Pumping Equipment.
12/3-5: Pmpd all wtr.
12/6/87: Pmpd 11 BO & 44 BW.
12/10/87: Pmpd 20 BO & 47 BW w/22 MCFD on 24 hour test.



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

SIGNED

TITLE Pat Drexler Agent

DATE 12/10/87

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DEC 15 1987

*See Instructions on Reverse Side