

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N. M. OIL CONC. COMMISSION
SUBMIT IN TRIPPLICATE
Other instructions on reverse side
HOBBS, NEW MEXICO 88240

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

LEASE DESIGNATION AND SERIAL NO.

NM-57710

IF INDIAN, ALLOTTEE OR TRIBE NAME

UNIT AGREEMENT NAME

FARM OR LEASE NAME
MWJ 34 FEDERAL

WELL NO.

1

FIELD AND POOL, OR WILDCAT

Vada/Penn

SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 34, T-8S, R-36E

COUNTY OR PARISH

Roosevelt

STATE

New Mexico

PERMIT NO.

API # 30 041 20820

ELEVATIONS (Show whether DF, RT, GR, etc.)

4084' GL

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

REPAIRING WELL

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

TD well & run casing

(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.) *

12/12/87: TD 9970' Ran 241 jts 5-1/2" 17# csg & set @ 9970'. Cemented w/Halliburton using 500 sx Halliburton Lite followed by 400 sx 50/50 poz "a" w/6% Halide 22A, 5# KCL & 2% gel. PD @ 9:30 PM 12/11/87. WOCU.

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

SIGNED

TITLE Pat Drexler - Agent

DATE 12/12/87

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PETER W. CHESTER
TITLE

DATE

DEC 16 1987

*See Instructions on Reverse Side
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

RECEIVED

DEC 18 1987

OCD
HOBES OFFICE