Form 9-331
Dec. 1968

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N. M. OIL CONS. COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
NM 4039

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

7. UNIT AGREEMENT NAME

OIL WELL [X] GAS WELL [ ] OTHER

2. NAME OF OPERATOR
Petroleum Production Management, Inc.

8. FARM OR LEASE NAME
Will 693 Ltd.

3. ADDRESS OF OPERATOR
Suite 200/Sutton Place Bldg. Wichita, Kansas 67202

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
1830'FSL, 1900' FEL, Sec. 34, T-8-S, R-35-E

10. FIELD AND POOL, OR WILDCAT
Vada Penn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 34, T-8-S, R-35-E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4174.6' GL

12. COUNTY OR PARISH
Roosevelt

13. STATE
N.M.

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[ ]	REPAIRING WELL	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[X]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other)			[ ]
(OTHER)			[ ]	(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.)*

1. Remove 15" x 5' conductor.
2. Fill hole with ready-mix cement.
3. Install dry hole marker and rig down spudder unit.

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

SIGNED [signature] TITLE District Engineer DATE 7-13-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
PETER W. CHESTER
JUL 30 1990
BUREAU OF LAND MANAGEMENT

*See Instructions on Reverse Side