

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT N. M. OIL CONS. COMMISSION

SUBMIT IN TRIPPLICATE (Other instructions reverse side)

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

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.)

LEASE DESIGNATION AND SERIAL NO.

NM-0509201

IF INDIAN, ALLOTTEE OR TRIBE NAME

UNIT AGREEMENT NAME

Bluitt San Andres Unit

FARM OR LEASE NAME

WELL NO.

14

FIELD AND POOL, OR WILDCAT

Bluitt San Andres Assoc.

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

Sec 18, T8S, R38E

COUNTY OR PARISH STATE

Roosevelt NM

1. OIL WELL [X] GAS WELL [] OTHER []

2. NAME OF OPERATOR Plains Petroleum Operating Company

3. ADDRESS OF OPERATOR 415 West Wall, Suite 1000, Midland, TX 79701

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

Unit Letter N, 660' FSL & 1980' FWL

14. PERMIT NO. 38 041-20855

15. ELEVATIONS (Show whether OF, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF [] PELL 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* [X] (Other) Casing Integrity

(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.)

8-1-94 Laid down all production equipment. Set CIBP @ 4700' w/2 sx cement.

8-29-94 Tested casing to 500 psi for 30 minutes, held OK Chart attached. BLM witnessed.

Request TA status as per PPOC's meeting with Tony Ferguson on 3-21-94 and subsequent letter dated 3-29-94.

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

SIGNED Stephen D. Owen TITLE Area Engineer DATE September 8, 1994

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED FOR 12 MONTH PERIOD ENDING AUG 29 1995 See Instructions on Reverse Side

SEP 23 1994


GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

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Blatt 181419
BR 2221

