

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240

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 <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM 3286
2. Name of Operator Petroleum Development Corporation	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 4113 Eubank NE, Suite 400, Albuquerque, NM 87111 (505) 293-4044	7. If Unit or CA, Agreement Designation M
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FSL 330' FWL S27, T12S, R30E	8. Well Name and No. Hudson Federal #1
	9. API Well No. 30-005-00487
	10. Field and Pool, or Exploratory Area Mescalero Sands Mississippi
	11. County or Parish, State Chaves County, NM

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 checked="" 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 type="checkbox"/> Other
	<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.)*

1. Ran 72 hr BHPB on 12/21/2002 → 2001
2. Having surface equipment replaced/refurbished starting 2/8/2002
3. Will move on well to acidize approx 2/18/2002
4. Will acidize perms from 9746' - 9782' 2 JSPF w/5000 gallons 15% acid
5. Flow test
6. Put on production

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

Signed [Signature] Title Production Manager Date 2/12/02

(This space for Federal or State Office use)

Approved by [Signature] Title P.E. Date 2/12/02

Conditions of approval, if any:

RECEIVED
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BUREAU OF LAND MANAGEMENT
HOSWELL OFFICE