

(November 1983)
(Formerly 9-331)

U.S. DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N. M. OIL CONS. COMMISSION
P.O. BOX 1980
HOBBS, NEW MEXICO 88240

LEASE DESIGNATION AND SERIAL NO.

NM 0314228

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.)

| | | | |
|---|--|--|-----------------|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| 2. NAME OF OPERATOR Dalport Oil Corporation | | 7. UNIT AGREEMENT NAME | |
| 3. ADDRESS OF OPERATOR 1401 Elm Street #3471, Dallas, Texas 75202 | | 8. FARM OR LEASE NAME Stringer - Federal | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FS & WL Unit M | | 9. WELL NO. 1 | |
| 14. PERMIT NO. | | 10. FIELD AND POOL, OR WILDCAT Southeast Chaves On area gas | |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4094 KB | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 17-12S-31E | |
| | | 12. COUNTY OR PARISH Chaves | 13. STATE NM |

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

NOTICE OF INTENTION TO:

| | |
|--|---|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) Plug & Abandon | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

(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.)*

ORIGINAL INFORMATION:

8-5/8" - 20# at 295' w/200 sx "C", 2% c.c., circulated.
TD 4060', Ran 2607' 4-1/2" - 9.5#, 300 sx 50-50 Poz + 10% salt.
Perf 2535'-42', acid 500 gal. 15%, frac 15,000 gal. crude + 22,500# sd. Gas well.

WILL PLUG AS FOLLOWS:

120' plug 2576' - 2456'; tag top. Mud between all plugs.
120' plug 1770' - 1550'
110' plug 1000' - 890'; NOTE: Either cut and pull casing at 1000' and place 55' plug below stub and 55' above stub; or perforate at 1000' and squeeze 110' plug into formation. Place 110' plug inside casing at 1000' - 890'.
100' plug 345' - 245'; perforate at 295' and squeeze 100' plug into formation and place 100' plug inside casing at 345' - 245'.
50' plug 50' - Surface; set 4' marker with name, lease and location. Clean location.

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

SIGNED Peter M. J. [Signature]

TITLE Geologist

DATE 8-30-91

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
PETER M. J. [Signature]
DATE

SEP 9 1991

*See Instructions on Reverse Side

RECEIVED

AUG 35 10 16 AM '91

BUREAU OF
ROSWELL AIR FORCE
AREA

SEP 10 1991

SEP 10 1991

MAILING OFFICE