

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Div.
P.O. Box 1980
Hobbs, NM 88241

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

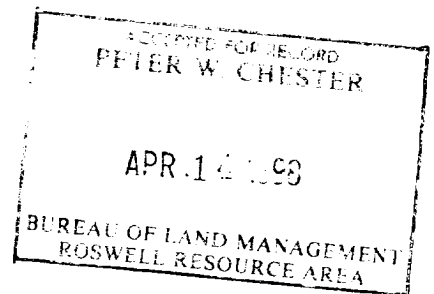
SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM 15016
2. Name of Operator Petroleum Development Corporation	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 9720-B Candelaria NE, Albuquerque, NM 87112 505-293-4044	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FNL & 1980' FEL, Section 6, T8S, R31E	8. Well Name and No. Wattam Federal
	9. API Well No. 1
	10. Field and Pool, or Exploratory Area CATO
	11. County or Parish, State Chaves Co., 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 type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>Horizontal Reentry</u>	<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) MIRUPU & Drilling Equipment 11/11/93
- 2) Drilled Cement Plugs; Surface-451', 1122' -1250'; 3405' -352' & CIBP @3522'
- 3) Set Cement & Retainer @ 3663; Squeezed Perfs 3678'-3756' w/200 sxs Class H, 2% Cacl.
- 4) Drilled Cement 3532' -3663'
- 5) Mill Casing from 3600' to 3650'
- 6) Spot 35 sx class H Cement plug f/3663'-3333', circulated out @ 3477'
- 7) Drilled cement 3470' to 3630'
- 8) Drilled Horizontal arc from 3630' -3756'; TVD 3709'
- 9) Drilled Horizontal Lateral to 4231'
- 10) Acidized w/7000 gal. 20% NEF acid
- 11) Swab tested, Put on pump 1/8/94



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

Signed [Signature] Title President Date 3-10-95

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

