

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

Bureau 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry Hole	7. UNIT AGREEMENT NAME -----
2. NAME OF OPERATOR John S. Goodrich	8. FARM OR LEASE NAME Phillips Federal
3. ADDRESS OF OPERATOR 4000 N. Big Spring, Suite 109, Midland, Texas 79705	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL and 660' FEL of Section 18	10. FIELD AND POOL, OR WILDCAT SE Chaves Queen Gas Area Asso.
14. PERMIT NO 1-10-86	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4047.9' GL
	12. COUNTY OR PARISH Chaves
	13. STATE NM

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 PLANE <input type="checkbox"/>
(Other) <input type="checkbox"/>	

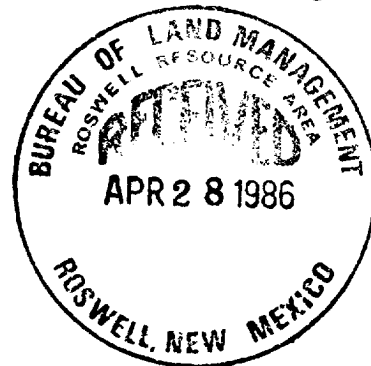
SUBSEQUENT REPORT OF:

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 checked="" type="checkbox"/> XX-Drilling Operations	

(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 and 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.)

- Spudded well @ 8:30 P.M. 1-18-86 w/ 12 1/4" bit.
- Drilled to 371' and set 361' (9 joints) of 8 5/8" 24# casing @ 368'. Cemented w/225 sx Class "C" cement w/2% CaCl. Circulated 10 sx cement to pit @ 6:30 A.M. 1-19-86.
- Installed BOP and tested BOP plus 8 5/8" casing w/1000# for 30", tested okay.
- Drilled 7 7/8" hole to 2730' TD. Reached TD @ 6:30 A.M. 1-23-86 after noting salt water flow @ 2556'.
- Ran DLL & CN/LD logs. Prep to plug and abandon.



I hereby certify that the foregoing is true and correct

SIGNED John S. Goodrich TITLE Operator

DATE 2-4-86

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

ACCEPTED FOR RECORD
PETER W. CHESTER

DATE _____

APR 29 1986

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side

RECEIVED
MAY 2 1988
O.C.D.
HOBBS OFFICE