

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

Form approved.  
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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Dry Hole	5. LEASE DESIGNATION AND SERIAL NO. NM-60051
2. NAME OF OPERATOR Bell, Foy & Middlebrook, Ltd.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 310 W. Texas, Suite 210, Midland, Texas 79701	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FWL & 660' FNL, NE/4 NW/4, Unit Letter C	8. FARM OR LEASE NAME Isler Federal
14. PERMIT NO. Approved 7/7/89	9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4,086'	10. FIELD AND POOL, OR WILDCAT Undesignated - also
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T10S, R30E
	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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Set plugs	X
(Other)		(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.) \*

1. Spot 35 sxs cement across perfs @ 7500',
2. Tag plug across perfs @ 7380. Spot 25 sxs cement @ 4300',
3. Spot 25 sxs cement across 8 5/8" shoe inside of 5 1/2" csg @ 2925',
4. Spot 35 sxs cement across 5 1/2" stub @ 2650'
5. Spot 50 sxs cement across 13 3/8" shoe @ 520' inside 8 5/8" csg,
6. Cut surface head, spot 30 sxs @ surface, erected dry hole marker.

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

SIGNED [Signature] TITLE Partner DATE 4-13-89

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: Approved as to plugging of the well bore,  
Liability under bond is retained until  
surface restoration is completed.

\*See Instructions on Reverse Side

APPROVED  
PETER W. CHESTER  
MAY 19 1989  
BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA