

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate*
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

RECEIVED

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.)

MAR 23 11 07 AM '94

MAR 25 3 19 PM '94

BUREAU OF LAND MANAGEMENT
HOBBES, NM.

5. LEASE DESIGNATION AND SERIAL NO.

NM 2842 A

6. IF INDIAN ALLOTTEE OR TRIBE NAME

N.M. OIL CONS. COMMISSION

P.O. BOX 1980

7. UNIT LOCATION
HOBBES, NEW MEXICO 88240

2. NAME OF OPERATOR
Coastal Oil & Gas Corporation

8. FARM OR LEASE NAME

Federal "20"

3. ADDRESS OF OPERATOR
P. O. Box 235, Midland, Texas 79702

9. WELL NO.

4

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface

10. FIELD AND POOL, OR WILDCAT

Baum (U. Penn)

Unit G, 2080' FNL & 2080' FEL

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 20, T-13-S, R-33-E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 4259.5'

12. COUNTY OR PARISH

Lea

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 checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input checked="" 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 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.)*

- MIRU Pulling Unit. Install BOP. PU workstring, GIH with bit and scraper to ± 9700'. POOH.
- Set CIBP on WL at 9653'. Dump 35' of cmt on top of CIBP (4 sacks).
- GIH with tbg. Circ hole from 9615' with 9.5 PPG mud.
- POOH to 7200', spot 100' cmt plug from 7200'-7100' (15 sacks). POOH with tbg.
- Cut 5-1/2" csg at ± 4100' (or free point). LD casing.
- GIH with tbg, spot 150' cmt plug from 50' below 5-1/2" csg stub to 100' above (50 sacks). The top of this plug should be 100' above 8-5/8" csg shoe (which is at 4075'). WOC 4 hours and tag plug. Spot additional plug as needed. POOH with tbg.
- Cut 8-5/8" csg at ± 1200'. LD 8-5/8" csg.
- GIH with tbg, circ hole from ± 1250' with 9.5 PPG mud. Spot 100' cmt plug from 1250'-1150' (use 60 sacks). WOC and tag plug.
- Spot 100' cmt plug across 13-3/8" csg shoe from 425'-325'. (Use 80 sacks). WOC and tag plug.
- Spot 50 sack cmt plug from 50' to surface.
- Install P&A marker. Clean and level location.

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

SIGNED Bobby L. Smith TITLE Sr. Petroleum Engineer

DATE 3/24/94

(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) JOE G. LARA TITLE PETROLEUM ENGINEER

DATE 4/12/94

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side