

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on re-  
verse side)

Expires August 31, 1985

N. M. OIL

NS. COMMISSION

LEASE DESIGNATION AND SERIAL NO.

Las Cruces 058408 - 8

P. O. BOX 1980

IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

HOBBS, NEW MEXICO 88240

(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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME API # 30-025-00698	
2. NAME OF OPERATOR Fina Oil & Chemical Company		8. FARM OR LEASE NAME Johns "B"	
3. ADDRESS OF OPERATOR P.O. Box 2990, Midland, TX 79702		9. WELL NO. #3	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL 1480' FEL Sec. 26 Unit D		10. FIELD AND POOL, OR WILDCAT Maljamar (Grayburg-San Andre)	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 26-17S-32E	
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 3953 DF 3960 KDB		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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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"/> Casing Integrity/TA status	

(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.) \*

On 4/7/86 a 5 1/2" Elder "Sure-drill" CIBP was set @ 4000' GL. The wellbore was filled w/ 100 bbls Tretolite pkr fluid. The casing was pressure tested to 500# and held OK. On 5/14/93 the casing was retested for mechanical integrity. Pressure was applied at 500# for 30 min. There was a 10# leak off during the test. A BLM representative witnessed the MIT.

We request that the well be placed in a temporarily abandoned status while the wellbore is evaluated for a potential Queen recompletion.

Note: The successful MIT chart is attached.

RECEIVED  
MAY 21 9 45 AM '93  
CART  
ART

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

SIGNED Neva Herndon

TITLE Petrotechnical Associate

DATE 05/20/93

(This space for Federal or State office use)

APPROVED BY (ORIG. SGT.) ICE G. LARA

TITLE DEPUTY ASST. DIR.

DATE

CONDITIONS OF APPROVAL, IF ANY:

GR  
5/20/93

\*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

7-28-93  
57P

