

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU LAND MANAGEMENT

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

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 formation.
Use "APPLICATION FOR PERMIT—" for such proposals.)

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC 054687	
2. NAME OF OPERATOR V-F PETROLEUM INC.		6. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 110 N. MARIENFELD STREET, SUITE 580, MIDLAND TX 79701		8. FARM OR LEASE NAME HUDSON FEDERAL	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface From Maljamar, New Mexico. Go South 1.5 miles then East 1980'.		9. WELL NO. 1	
14. PERMIT NO.		11. FIELD AND POOL, OR WILDCAT MALJAMAR ABO	
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OR PARISH Lea	
		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 PLANS	<input type="checkbox"/>
(Other) Plug back & re-complete		XX	

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)			

(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. Pull all production equipment.
2. Install B.O.P.
3. Set CIBP @ 9,650'. Dump 35' cement on top.
4. Test csg & BOP to 1,500# for 30 min.
5. Set CIBP @ 8,950'. Dump 35' cement on top.
6. Perforate Abo zone 8,876-3,912'.
7. Acidize with 1500 gal.
8. Swab test.
9. Commence production from Abo zone.

RECEIVED
APR 11 1 28 PM '97
BUREAU OF LAND MGMT
HOBBS, NM

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

SIGNED David R. Glass

TITLE Superintendent

DATE 4/10/97

(This space for Federal or State office use)

FORIG. SCD. DAVID R. GLASS

APPROVED BY

TITLE

PETROLEUM ENGINEER

DATE

APR 18 1997

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side