

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions
verse side)

Budget Bureau No. 1004-1
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

LC-029509B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

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

2543/8 + 2625/E
Unit 8

14. PERMIT NO.

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

API# 30-025-30114

7. UNIT AGREEMENT NAME

MCA Unit

8. FARM OR LEASE NAME

MCA Unit

9. WELL NO.

#378

10. FIELD AND POOL OR WILDCAT

Majamar G-5A

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

Sec. 22, T. 17S, R. 32E

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

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

Temporary Abandonment X
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.)*

7-28-89 Test to 500# for 15 min. Held.
RBP set @ 3678'
Chart Attached

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

SIGNED W.W. Baker W.W. Baker

TITLE Administrative Supv.

DATE Aug. 7, 1989

(This space for Federal or State office use)

(ONIG, SGD) DAVID R. GLASS

APPROVED BY

Fox

TITLE CHIEF, MINERAL RESOURCES

DATE 8-18-89

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

APPROVED FOR 12 MONTH PERIOD

09-01-90

[illegible]

INSTRUMENT ENGINEERS
MCA #378
7/28/89
VINE & ASSOC. INC.

DATE: 10/10/10

TIME FOR US

DATE FOR US

TIME & GOLF SIZE
TIME TAKEN OFF
DATE TAKEN OFF

BR-2221
B 0-1000-8