Form 3160-5 (June 1990)

ED STATES **1U** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division P.O. Box 1900 Hobbs, NIA 8324

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993

5. Lease Designation and Serial No.

NM-4312

SUNDRY NOTICES AND REPORTS ON WELLS 6. If Indian, Allottee or Tribe Name

Do not use this form for proposals to drill Use "APPLICATION FOR F	or to deepen or reentry to a different reservoir. PERMIT—" for such proposals	
SUBMIT IN TRIPLICATE 1. Type of Well 1. Oil 1. Gas 1. Gas		7. If Unit or CA, Agreement Designation 8. Well Name and No.
Nearburg Producing Company		9. API Well No.
. Address and Telephone No.		30-025-26498
P. O. Box 823085, Dallas, TX 75382-3085 (214) 739-1778		10. Field and Pool, or Exploratory Area
Location of Well (Footage, Sec., T., R., M., or Survey Description)		"EK" Bone Spring 11. County or Parish, State
2,180' FSL & 660' FEL, Sec.	1, T-19-S, R-33-E	Lea County, New Mexico
CHECK APPROPRIATE BOX(s)	TO INDICATE NATURE OF NOTICE, REPO	ORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTIO	N ·
Notice of Intent	Abandonment	Change of Plans
TOTAL OF AMOUNT	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	Other	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
4. Set CIBP at 9,645' and 6 5. Perforate Bone Spring 9, 6. Acidize and test. 7. Swab Bone Spring. 8. Put on production 2-6-97 9. RDMO	cap with 35' cement. New PDTD at 9,300' - 78' with casing gun at 2-JS	RECEIVED 1991 NAY 16 P 9: 54 BUREAU OF LAND MGMT. ROSWELL OFFICE
14. I hereby certify that the foregoing is prue and correct Signed (This space for Federal or State office use) Approved by Conditions of approval, if any:	Title Mgr. of Drlg and Prod. Title CORD DRIC SCD.) DAVID R. GLA	Date
Title 18 U.S.C. Section 1001, makes it a crime for any person is or representations as to any matter within its jurisdiction.	*See Instruction on Reverse Side	nited States any false, fictitious or fraudulent statemen
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