COPY TO O. C. C. Form approved. Budget Bureau No. 42-R1424. TED STATES Form 9-331 (May 1963) CATE* SUBMIT IN TR DEPARTMENT OF THE INTERIOR (Other in verse side) 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY NM-25513 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.) 7. UNIT AGREEMENT NAME WELL X OTHER 8. FARM OR LEASE NAME NAME OF OPERATOR Lewis B. Burleson, Inc. Berry Federal 3. ADDRESS OF OPERATOR 9. WELL NO. Box 2479, Midland, TX 79702 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 Querecho Plains Queen Asso. 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit E, Section 35, T-18-S, R-32-E Sec. 35, T18S, R32E 12. COUNTY OR PARISH | 13. STATE 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3715.2 GL NM 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: REPAIRING WELL TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING FRACTURE TREAT SHOOTING OR ACIDIZING ABANDONMENT* SHOOT OR ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS (Other) (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) 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.) * Fraced with 15,000 gal water, 15,000 gal. $\rm CO_2$ and 57,000# sand., Average treatment 14 bpm @ 3300#, ISDP 2010#, 15 min. 1850# , total load 440 bbls. Swabbed, good show of oil. Completed on 6-25-80. JUL 7 1980 U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO 18. I hereby certify that the foregoing is true and correct President 7-3-80 TITLE . SIGNED (This space for Federal or State office use) APPROVED BY TITLE . accepted f**ortreco**rd CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

U.S. GEOLÓG ROSWELL, NEW MEXICO