SUNDR Do not use the abandoned we SUBMIT IN TR 1. Type of Well 2. Name of Operator 3a. Address 815 West Te Fort Worth, 4. Location of Well (Footage, Sec 660' FSL an	0il Company nth Street Texas 76102	TERIOR TERIOR TS ON WELL drill or to re-end for such propo ctions on reve 3b. Phone No. (in 817/332	sals. rse SIde clude area code)	FORM APPROVED OMB No. 1004-0133 Expires November 30, 2000 5. Lease Serial No. NM 28028 6. If Indian, Allottee or Tribe Name N/A 7. If Unit or CA/Agreement, Name and/or No. N/A 7. If Unit or CA/Agreement, Name and/or No. N/A 8. Well Name and No. Federal CS No. 1 9. API Well No. 30-025-27434 10. Field and Pool, or Exploratory Area E-K Yates Seven Rivers Oueen 11. County or Parish, State Lea County, New Mexico
	PROPRIATE BOX(ES) TO	INDICATE NA	TURE OF NOTICE, R	REPORT, OR OTHER DATA
12. CHECK AF	FROFRIATE BOA(20) 10		TYPE OF ACTION	
 Notice of Intent Subsequent Report Final Abandonment Notice 13. Describe Proposed or Complete If the proposal is to deepen dire Attach the Bond under which the following completion of the imit testing has been completed. F determined that the site is ready The Federal to test the Main September, 1999. This Main Zo Production from and 20-25 MGFGPD During June were squeezed wi 4476'-94' perfor Upper Queen was After acidi the yeall was pla 	Alter Casing Alter Casing Casing Repair Change Plans Convert to Injection Upper Convert to Injection Convert to Injectio	nent details, including ly, give subsurface le vide the Bond No. or results in a multiple e filed only after all plugged bay Queen thro ueen was pr he Upper Qu one of the drilling ou lug was set 44'-53'. treating th to obtain a	on Temporarily Al on Water Disposal pper Queen gestimated starting date of a cations and measured and to file with BLM/BLA. Requ completion or recompletion requirements, including rec ck from the Per ugh perforation oduced from Oct een during May, Upper Queen per t cement after at 4468' and the ese Upper Zone productivity	Well Integrity Other Other any proposed work and approximate duration thereof. The vertical depths of all pertinent markers and zones. The subsequent reports shall be filed within 30 days in a new interval, a Form 3160-4 shall be filed once lamation, have been completed, and the operator has prose (Lower Queen) sand its from 4476'-94' during tober, 1999 to June, 2000. 2000 was 4 BOPD, 140 BWPD, contations from 4476'-94' the squeezing of the the Upper Queen perforations, test. On test during
 I hereby certify that the forego Name (Printed/Typed) 	C. W. Stumhoffer	7	T 1 00 20	
Signature C. C.	J. Stumbeller THIS SPACE F	OR FEDERAL C	OR STATE OFFICE US	PL ROLEUM ENGINEER
Approved by Conditions of approval, if any, are certify that the applicant holds le which would entitle the applicant to Title 18 U.S.C. Soction 1001 and States any false, fictitious or fraud	e attached. Approval of this notic gal or equitable title to those right oroquict operations thereon.	e does not warrant of ts in the subject leas	Title Or Office	Date Ity to make to any department or agency of the United