

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

Form approved.
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 reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 45225
2. NAME OF OPERATOR BelNorth Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR One Pet. Center #6, Suite 201, Midland, Texas 79702		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 660' FWL		8. FARM OR LEASE NAME Uncle Sam 25 Fed. Com.
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3754.4' GR		10. FIELD AND POOL OR WILDCAT Und. Querecho Plains Upper (Bone Springs)
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 25, T18S, R32E
		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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) PB from South Corbin Morrow 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.)

Existing perforations in Morrow 13,186' to 13,530' (total 162 holes)

TIH with tubing plug and set in 2.31" ID "F" nipple at 13,081 feet. Dump 2 sx. sand on top of tubing plug. Spot 35 feet (4 sx.) cement plug on top of packer and plug. *Not a permanent plug back.*
Perforate casing with 4 holes at 8850 feet. Squeeze perfs with 200 sacks Glass H cmt. *R.D.*
Perforate the Bone Springs 8600 to 8650 feet. Acidize w/1500 gals 7½% MSA and frac with 40,000 gals + 58,000# sand. Swab and/or flow test.

Change of operator
D.O. submitted

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

SIGNED <u>Betty Eldon</u>	TITLE <u>Agent for BelNorth Petroleum Corporation</u>	DATE <u>1/13/86</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE <u>1-23-86</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

RECEIVED
JAN 24 1987
U.S. CUSTOMS
HOUSE OF ICE