

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU LAND MANAGEMENT

SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-26692

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal 26-A

9. WELL NO.

1

10. FIELD AND POOL OR WILDCAT

EK Bone Spring

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

Sec 26-T18S-R33E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

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

J. M. Huber Corporation

3. ADDRESS OF OPERATOR

7120 I-40 West, Suite 232, Amarillo, Texas 79106

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

At surface

660' FSL & 1980' FWL of Section 26

14. PERMIT NO.

30-025-29249

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

KB 3830'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Verify Producing Zone

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

The purpose of this notice is to verify that the subject well is producing from the following Bone Spring perforations:

9033-37'; 45-47'; 50-52'; 59-65'

9288-99'

9726-32'

10,214-19'

Work associated with Notice of Intention to Recomplete in the Queen, filed 8/13/86, was not performed.

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

806/353-9837

SIGNED

Robert R. Glenn

TITLE Dist. Production Manager

DATE May 9, 1988

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED FOR RECORD

DATE

CONDITIONS OF APPROVAL, IF ANY:

MAY 9 1988

*See Instructions on Reverse Side

SJS
CARLSBAD, NEW MEXICO

RECEIVED

MAY 27 1988

SCD
HOBBS OFFICE