Form 3160-5 (November 1983)	Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO. NM-0245247					
Formerly 9–331) DEPARTMENT JF THE INTERIOR verse aide) BUREAU OF LAND MANAGEMENT						
SUNDI (Do not use this for	RY NOTICES A	ND REPORTS	ON WELLS	6. IF INDIAN, ALLOTT	SE OR TRIBE NAME	
(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.				7. UNIT AGREEMENT NAME		
OIL X GAS C	OTHER			8. PARM OR LEAGE W.		
Manzano Oil Corporation 505/623-1996 8. ADDRESS OF OFERATOR P.O. Box 571, Roswell, NM 88202				Edith Fed	Edith Federal 9. WELL NO. 10. FIELD AND POOL, OR WILDCAT Undes. E.K. Bone Springs	
				3		
4. LOCATION OF WELL (Repo See also space 17 below.)	1					
At surface 2130' FNL &	11. SEC., T., R., M., OR BLE. AND SURVEY OR ARMA					
				Sec 25,T18S,		
14. PERMIT NO.	15. ELEV	VATIONS (Show whether DI 3855.4 GL	, ST, GE, etc.)	Lea	N.M.	
			LA CALCO Donatos			
16.	Check Appropriates to:	e Box to Indicate C	lature of Notice, Report, or	QUBNT EBPORT OF:		
TEST WATER SHUT-OFF		LTER CASING	WATER SHUT-OFF	REPAIRING	WELL	
PRACTURE TREAT	MULTIPLE		PRACTURE TREATMENT	ALTERING	I—-I	
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	ABAHDONN & run casing	IRNT*	
REPAIR WELL	CHANGE PL	ANS	(Other) Spud well (Nors: Report resul	& run casing ts of multiple completion pletion Report and Logic	n ez Well	
(Other) 17. DESCRIBE PROPOSED OR CO	MPLETED OPERATIONS	Clearly state all pertines	t details, and give pertinent date tions and measured and true vert	e, including estimated d	ate of starting any	
proposed work. If we nent to this work.) *	di le directionally drille	ed. Sive Substituce loca	bous and measured and true vert	ical deptins for all mate	ere and annes bere-	
Drill Set a	ed 17-1/2" hol nd cemented @	le to 353'. Ra 353' with 350	with WEK Drilling, an 9 jts 13-3/8" 54.9 sacks Class C cmt w @ 7:10 p.m. 8/18/85	5# (365.84') ca ith 2% CaCl. (ısing.	
@ 370 follo	0' with 1300 swed by 300 sks	sks Halliburto s Class C w/2%	708') 24 & 32# 8-5/8 n Lite cmt w/15# sal CaCl. Circulated li sure casing and plug	t & 1/4# flosea 25 sks to surfa	al per sk	
				Maria de la compania		
•						
			•	· · ·		
			Ang			
			King .			
				4.5		
18. I hereby certify that the SIGNED / White	foregoing is true and		ackie Midkiff/Prod.	Clrk. DATE 8	/27/85	
1/11/11/11	Medly	. C	ackie Midkiff/Prod.	Clrk. DAVE 8	/27/85	
	or State office of	. C	ackie Midkiff/Prod.	Cirk. DATE 8	/27/85	

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SEP -9 1985

O.C.D. HOBBS OFFICE