

*Confidential*  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP. DATE\*  
(Other instructions on 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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-04591
2. NAME OF OPERATOR Sun Exploration & Production Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1861, 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 Unit Ltr. H, 2080' FNL & 600' FEL		8. FARM OR LEASE NAME New Mexico Federal Comm.
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3952.3 GL		10. FIELD AND POOL, OR WILDCAT Wildcat Morrow
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24, T-18-S, R-33-E
		12. COUNTY OR PARISH Lea
		13. STATE New Mexico

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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>New Well-setting of csg.</u>	(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.) \*

TIGHT HOLE

- 12-19-86 Spudded at 12 Noon 12-18-86. R&C 9 JTS 13-3/8" CSG, CS 404, IF 361, HOWCO CMT W/425 SXS C W/2% CACL2 & 1/4# FLOCELE, PD 7:00 PM, FP 250-500, FLOAT HELD, CIRC 110 SXS CMT.
- 12-20-86 TEST BOP & CSG 1000# OK.
- 12-30-86 SCHLUM RAN BOREHOLE SONIC FROM LOGGERS TD 5292 TO SURF.
- 12-31-86 RAN & CMT'D 122 JTS 8-5/8", 32#, K-55, STC & LTC CSG, CS 5280', FC 5191, STAGE COLLAR 3294'. HOWCO CMT'D 1ST STAGE W/600 SXS HOWCO LITE + 10% SALT + 1/4# FLOCELE, TAILED IN W/250 SXS CLASS C NEAT CMT, FP 900#, FLOAT HELD, DROP BOMB, OPEN STAGE COLLAR, CIRC 4 HRS, CIRC 200 SXS OFF STAGE COLLAR, HOWCO CMT'D 2ND STAGE W/1500 SXS HOWCO LITE + 10% SALT + 1/4#/SK FLOCELE, TAIL IN W/50 SXS C NEAT, PD 12:45 AM, FP 1000-2000#, CLOSE STAGE COLLAR, CIRC 245 SXS TO PIT.

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

SIGNED Maria L. Perez TITLE Accountant DATE 12-31-86  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

JAN 07 1987

*Jm*  
CARLSBAD, NEW MEXICO

\*See Instructions on Reverse Side