

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP  
(Other instruction  
verse side)

TE\*  
re

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

3. LEASE DESIGNATION AND SERIAL NO

NM-0554244

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "L"

9. WELL NO.

2

10. FIELD AND POOL OR WILDCAT

Guerecho Plains - Upper  
Bone Springs

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

23-18S-32E

14. PERMIT NO.

API No. 30-025-29770

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

3781.5'

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

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 COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Set Surface Casing

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.)\*

Spudded at 4:00 P.M. 10/14/86.

10/16/86 - Ran guide shoe, shoe joint 42.18', insert float, 3 centralizers, 11 joints 13-3/8" 61# and 54# J-55 ST&C 400.64'. Total 442.82', set at 441'. Western cemented with 250 sacks of Class "C" lite with 2% CaCl with 1/4# flocele and 200 sacks of Class "C" lite with 2% CaCl. PD to 400' at 6:30 A.M. Circ 50 sacks.

ACCEPTED FOR RECORD

*GWB*  
OCT 24 1986

CARLSBAD, NEW MEXICO

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

SIGNED

*Raymond Thompson*

TITLE Engr. Oprns. Sec.

DATE 10/21/86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side