

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Form approved
Budget Bureau No. 1004-4
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

NM 63368

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bondurant Federal

9. WELL NO.

#2

10. FIELD AND POOL OR WILDCAT

West Tonto-Yates

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

Sec 13, 19S, 32E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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
Hopper-Barnett, Inc.

3. ADDRESS OF OPERATOR
P.O. Box 1706, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
990' FWL & 2310 FNL, Sec 13, 19S, 32E

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
K.B. 3633.2

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 PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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.)*

1-29-88-Set 400' 8 5/8 23# casing and cemented w/ 250 sacks CLC Cement. Circulated 97 sacks of cement, waited 12 hours and tested BOP and drilled out w/ 7 7/8 bit.

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

SIGNED

Ray Hopper

TITLE

President

DATE

4-11-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

SJS

REC-139

APR 27 1988

OLD
HOBBS OFFICE