

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other Instructions on
reverse side)

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-053380

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Caviness 10 Federal

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Mescalero Escarpe Bone Spring

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

Sec. 10 T18S R33E

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 ☐ Non-Producing TA

2. NAME OF OPERATOR
Bison Petroleum Corporation

3. ADDRESS OF OPERATOR
5809 S. Western Suite 200, Amarillo, Texas 79110-3607

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

2026' FSL & 1961' FEL

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, CR, etc.)

3996 DF

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) Add'l Perforations & Stimulate

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.)

Start 10-25-90

Move in Completion Unit and run tubing.
Swab fluid to within 200' of proposed perforations
Perf. 8626-70 OA and 8135-60
Breakdown with 3,000 gal. acidize
Swab test. Acidize with 15,000 gal. acid
Run tubing, pump and rods. Put on production.

RECEIVED
OCT 24 12 35 PM '90
OCT 25 10 56 AM '90
BUREAU OF LAND MANAGEMENT
CARTER
SANTARCA
MEXICO

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

SIGNED Bruce E. Barthel TITLE President

DATE 10-23-90

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side