

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM LC065710A
2. Name of Operator Pioneer Natural Resources USA, Inc.	6. If Indian, Allottee or Tribe Name NA
3. Address and Telephone No. P. O. Box 3178, Midland, TX 79702 915 571-3937	7. If Unit or CA, Agreement Designation Lusk Deep Unit "A"
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) UL - K, 1980' FSL & 1980' FWL, Sec. 20, T19S, R32E	8. Well Name and No. 23 WIW
	9. API Well No. 30-025-34173
	10. Field and Pool, or Exploratory Area Lusk Delaware, West
	11. County or Parish, State Lea, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input checked="" type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other _____	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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) Disregard requested approval for the injection line construction. We will conduct an archaeological survey for the injection line at a later date.
- (2) Request approval for well pad and access road construction.
- (3) Request setting 825' of 13 3/8" Surface Casing in place of 850' of 13 3/8" Surface Casing.

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BUREAU OF LAND MGMT.
LAND RESOURCE AREA

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

Signed [Signature] Title Operations Engineer Date 10/20/97
(This space for Federal or State office use)
Approved by (ORIG. SGD.) TONY L. FERGUSON Title ADM, MINERALS Date 10-22-97
Conditions of approval, if any: