Firm	3169-:
(Jane	1990)

I. Type of Well N Well

2. Name of Operator

3. Address and Telephone No.

-IJNITED STATES JENT OF THE INTERIOR DEPA! BUREAU OF LAND MANAGEMENT

N.M. Oil ons. Divition 20. Box 1980

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

5. Lease Designation and Serial No. 010687 MMNM086

6. If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELL'Sobbs, NM 8824

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

7. If Unit or CA, Agreement Designation

Superior Federal # 6

8. Well Name and No.

30-025-21745

9. API Well No.

4. Location of Well (Footage, Sec., T., R., M., or Surve	Texas 79702 915 682-1828	30-025-21745 10. Field and Pool, or Exploratory Area
900' FSL & 1650' FWL S	ec. 25 T-19-S R-34E	Pearl Queen 49790 1. up or Parish, State Lea , N.M.
CHECK APPROPRIATE	((s) TO INDICATE NATURE OF NOTICE, RE	PORT, C9 OTHER DATA
THE OF SUBMISSION	TYPE OF ACT	
Notice of Intent X Subsequent Report	Abandonment Recompletion Plugging Back Casing Repair	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off
_	Other Casing Fumping Unit Repair Potential Partition of the Partition of t	Conversion to Injection Dispose Water

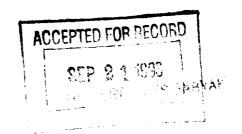
August 20, 1998

St. Clair Energy Corporation

Repaired Damaged Pumping Unit & Returned Well to Production.

give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

RECEIVED



14. I hereby certify that the foregoing is true and Signed Signed	correct			 	
(This space for Federal or State office use)	<u> </u>	Title _	Agent	 Date	
Approved byConditions of approval, if any:		Title _		Date	

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements