

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-086

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Government E

9. WELL NO.

7

10. FIELD AND POOL OR WILDCAT

Lea Bone Springs

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

25-19-34E

12. COUNTY OR PARISH

Lea

13. STATE

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
ARMSTRONG ENERGY CORPORATION

3. ADDRESS OF OPERATOR
P.O. Box 1973, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
660' FNL 1980' FWL

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

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☒ MULTIPLE COMPLETION ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
(Other) ☐

(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.)*

Propose to abandon present bone springs perforations by setting a
* CIBP above them. Plan to recomple in the Lea San Andres using a
gelled water sand frac.

* SET CIBP AT $\pm 10,170'$ $\pm 50'$ CEMENT
ON TOP.

RECEIVED

JUN 6 10 36 AM '91
CARL J. HODGES
AREA SUPERVISOR

RECEIVED
JUN 4 11 01 AM '91
BUREAU OF LAND MGMT.
HODGES, J.

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

SIGNED Mark Suggs

TITLE Production Supervisor

DATE June 3, 1991

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE 6-18-91

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side