

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE
(Other instructions
verse side)

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

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.)

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 BLK. AND
SURVEY OR AREA

Sec. 25-T19S-R34E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

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 perti-
nent to this work.)*

Work completed 01-10-90. Squeezed depleted bone spring zone, perfs at 9736'-54', with 700 sx cement. Drilled out cement and retainer, cleaned to TD of 10281'. Perforated new bone spring zone at 10230'-40', 1 SPF. Acidized first with 3000 gal. 15% acid. Later acidized with 8000 gal. 20% acid. I.P. 36 BOPD 76 BWPD.

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

SIGNED

John Sugg

TITLE Production Supervisor

DATE 02-15-90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side