Form 3160-5

## 'ED STATES

N.M. O	x 1780
D. 60 HO885	X 1960 R62240 NEW LEF Silvest No. 1004-0135 Expires: March 31, 1993

(TT-:	ice for Federal or State office use)				
Signed _	Carl Brown	Title Petroleum Engineer	9-19-95		
	mated starting date 9-20- certify that the foregoing is true and correct	-95.			
7.	Return to production.		,		
	Run packer and tubing.		and the second		
	·	2229'-12240' with 4000 gals. acid.	Maxica market		
	4. Perf Strawn 12229'-12240'.				
	<ol> <li>Set CIBP @ 13100' w/35' Class "H" cement.</li> <li>Perf Strawn 12229'-12240'.</li> <li>Stimulate Strawn perfs 12229'-12240' with 4000 gals. acid.</li> <li>Run packer and tubing.</li> </ol>				
1 CONTRACTOR OF THE PROPERTY O					
2.			ANNERS OF THE		
1.	Kill well. ND wellhead.	NU BOP.	SAIREAU DE		
	pose the following recomplerent Morrow perfs 13190'-1				
13. Describe give	Proposed or Completed Operations (Clearly state a e subsurface locations and measured and true verti	Ill pertinent details, and give pertinent dates, including estimated date of starting a cal depths for all markers and zones pertinent to this work.)*	any proposed work. If well is directionally drilled,		
		Cher	Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)		
	Final Abandonment Notice	Altering Casing	Conversion to Injection		
	Subsequent Report	Plugging Back Casing Repair	Non-Routine Fracturing Water Shut-Off		
	Notice of Intent	Abandonment	Change of Plans  New Construction		
<del></del>	TYPE OF SUBMISSION	TYPE OF ACTION			
12.		(s) TO INDICATE NATURE OF NOTICE, REPOR	T, OR OTHER DATA		
-			Lea County, NM		
			Quail Ridge (Morrow) 11. County or Parish, State		
303 W. Wall, Suite 1900, Midland, TX 79701 915-687-1777  4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			10. Field and Pool, or Exploratory Area		
Barbara Fasken  3. Address and Telephone No.			9. API Well No. 30-025-28064		
2. Name of Operator			8. Well Name and No. Ling Federal #1		
1. Type of Well Oil X Gas Well X Well Other					
	SUBMI	T IN TRIPLICATE	7. If Unit or CA, Agreement Designation		
Do no		Irill or to deepen or reentry to a different reservoir.  OR PERMIT—" for such proposals			
		S AND REPORTS ON WELLS	NM-14496 6. If Indian, Allottee or Tribe Name		
		LAND MANAGEMENT	Expires: March 31, 1993  5. Lease Designation and Serial No.		
(June 1990	DEPARTMŁ	NT OF THE INTERIOR HOSES	Expires: March 31 1993		