

UNITED STATES N. M. OIL CONS. COMMISSION
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
NEW MEXICO 88240Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-04868

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Petroleum Corporation of Texas	8. FARM OR LEASE NAME Federal "J"
3. ADDRESS OF OPERATOR Box 911, Breckenridge, Texas 76024	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2180' FSL & 1980' FEL	10. FIELD AND 1/4, OR WILDCAT Querecho Plains
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22, T-18S, R-32E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3762.9' GR
	12. COUNTY OR PARISH Lea County
	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Spud & run casing <input type="checkbox"/>	

(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.)*

2-14-83 Spud @ 10:30 AM on February 13, 1983.

2-14-83 Ran 28 jnts 24# J55 8-5/8" casing, set @ 1204', cemented w/650 sx., circulate to surface.

2-23-83 TD @ 4300', ran 106 jnts 5 1/2" 15.5# casing to 4298', cemented w/950 sx. circulated 42 sx. , plug down @ 6:45 AM 2-23-83, released rig @ 7:00 AM.

RECEIVED

MAR 1 1983

OIL & GAS
MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO

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

SIGNED Judean RaglandTITLE Production ClerkDATE 2-24-83

(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS

TITLE _____

DATE _____

CONDITIONS OF APPROVAL ANY _____

MAR 02 1983

MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

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MAR 3 1983

**O.C.D.
HOBBS OFFICE**