

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NEW MEXICO 88240

Budget Bureau NO. 1004-0133
Expires August 31, 1985

3. LEASE DESIGNATION AND SERIAL NO.
NM-24166

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 POE PROPERTIES, INC.	8. FARM OR LEASE NAME SPRINKLE FEDERAL
3. ADDRESS OF OPERATOR P. O. Box 9769, Fort Worth, Texas 76102	9. WELL NO. 3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650' FNL & 460' FEL of Section (Unit H) (SE $\frac{1}{4}$ NE $\frac{1}{4}$)	10. FIELD AND POOL, OR WILDCAT Scharb - Wolfcamp
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 9-19S-35E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3835' G.L.	12. COUNTY OR PARISH Lea
	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) Perforating & Treating	<input checked="" type="checkbox"/>
(Other)	<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.)*			

Well was perforated in the Wolfcamp formation from 10567-10680' with 40 shots. Perforations were treated with 4000 gallons of 10% acid. Formation broke down at 4000#. Average treating pressure was 4400#. Shut-in pressure was 3200#. 15-minute shut-in pressure was 2900#.

I hereby certify that the foregoing is true and correct

SIGNED

James A. Knaut
James A. Knaut

TITLE Agent

DATE 7-26-85

(This space for Federal or State office use)

APPROVED BY: *[Signature]*
CONDITIONS OF APPROVAL: IN ANY RECORD

TITLE

DATE

JUL 31 1985

*See Instructions on Reverse Side

7

RECEIVED

AUG - 6 1985

~~RECEIVED~~