

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

2. LEASE DESIGNATION AND SERIAL NO.

NM-57285

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Stivason Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Pearl Queen

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

Sec. 26, T 19S, R 34E

12. COUNTY OR PARISH 13. STATE

Lea

NM

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

MANZANO OIL CORPORATION

(505) 623-1196

3. ADDRESS OF OPERATOR

Post Office Box 2107, Roswell, New Mexico 88202-2107

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

660' FNL & 330' FEL Section 26, T 19S, R 34E, N.M.P.M.
Unit letter A.

14. PERMIT NO.

30-025-38796

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3763.5 GL

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 PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion, or 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 and 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.)*

Perf Queen Zone - 4686' - 4714' overall w/23 holes.
Acidize. Swab test for evaluation.
Return to production if justified.

RECEIVED
MAR 12 8 02 AM '90
CARTER
AREA OFFICE

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

SIGNED

Donnie Brown
(Donnie Brown)

TITLE

Vice President, Engineering

DATE

March 5, 1990

(The space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: