

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on
reverse 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-26395	
2. NAME OF OPERATOR The Superior Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 9 Greenway Plaza - Suite 2700 - Houston, TX 77046		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL & 660' FEL		8. FARM OR LEASE NAME Government "23"	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3818 GR		10. FIELD AND POOL, OR WILDCAT Lea, West-San Andres	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23, T-19S, R-34E	
		12. COUNTY OR PARISH Lea	13. STATE NM

16. 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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Csg test & cmt job</u> <input checked="" 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.)*

8-2/10-85 Drlg 7-7/8" hole.

8-11-85 TD 7-7/8" hole, logging.

8-12-85 FIN Logging.

8-13-85 RIH w/160 jts 5-1/2" 15.5# K55 LT&C csg, cmt on btm @ 6200' w/2500sx Trinity lite + 200sx Class C Neat, did not circ, cut off 5-1/2 csg, Rel Hillin Drlg.Co Rig #9.

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

SIGNED

Margaret Lewis

TITLE

MOBL PRODUCING TX & NM, INC
AS AGENT FOR THE SUPERIOR OIL COMPANY

DATE

8-20-85

(This space for Federal or State office use)

APPROVED BY

[Signature]

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

AUG 23 1985

*See Instructions on Reverse Side