

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL  
(Other instructions  
verse side)

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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 16359
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 FN & FWL		8. FARM OR LEASE NAME Government "23" A
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3805 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:

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)			

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			<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.)\*

9-14-85 MIRU Hillin Drlg. Co. Rig #9, SPUD & TD 12-1/4" hole, RIH w/13 jts 8-5/8" 24# K55 ST&C w/5 centl, cmt on btm @ 488 w/200x Class C, circ 60x ls + 47% hole WO, test 1000# - 30 min - ok.

9-15-85 WOC 18 hrs, Drlg new form.

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

SIGNED Nancy Lewis

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

DATE 9-23-85

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

OCT 1 1985

\*See Instructions on Reverse Side