

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions in 9-
verer 200r)

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Siete Oil & Gas Corporation

3. ADDRESS OF OPERATOR

P.O. Box 2523, Roswell, NM 88201

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

760' FNL, 330' FNL, NW/4 NW/4

16. PERMIT NO.

15. ELEVATIONS (Show whether SP, ST, OR, etc.)

3710'

5. LEASE DESIGNATION AND SERIAL NO.

NM - 9016

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Inca Federal ~~31~~

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

East Shugart Delaware

11. SEC., T., R., N., OR BLK. AND
SUBST OR AREA

Sec. 19: T18S, R32E

12. COUNTY OR PARISH

Lea

13. STATE

NM

18.

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 PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Surface Casing

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)

4/10/87 - L & M Rig #1 spudded 12 1/4" hole @ 5:00 pm - T.D. 12 1/4" hole to 351' @ 8:45 pm - ran 8 jts. 8 5/8" 24# csg. (352') set @ 350' KB - cemented w/200 sks H.E. 2, 2% CACL2, 1/4# celloflake - plug down @ 11:15 pm - circulated 30 sks to pit - deviation survey 3/4° @ 351' - install B.O.P. pressure test to 1000 PSI for 30 minutes, held O.K. - W.O.C.

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

SIGNED

M.D. Justice

TITLE V.P. Drlg. & Prod. Supervisor DATE 04/13/87

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED DATE RECORD

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side