

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on re-
verse side)

BLM Roswell District
Modified Form No.
NMXO-3160-4

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 ☒ GAS WELL ☐ OTHER ☐		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR <u>JFG ENTERPRISE</u>		8. FARM OR LEASE NAME <u>Lowell Fed</u>	
3. ADDRESS OF OPERATOR		9. WELL NO. <u>1</u>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>K</u>		10. FIELD AND POOL, OR WILDCAT <u>Tonto Bone Springs</u>	
14. PERMIT NO. <u>30-025-31008</u>		11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA <u>SEC 15 T 19S R 33E</u>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>3641.7 K.B.</u> <u>3622.7 GR.</u>		12. COUNTY OR PARISH <u>LEA</u>	
		13. STATE <u>New Mex</u>	

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 COMPLETION
ABANDON*
CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other) Setting

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

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.)*

5-29-91. Finished Setting Pumping Unit. LURKIN MARK 456D-256-144
PUMPING UNIT. RAN 1" - 7/8" + 3/4" Rods: 2 1/2" X 1 1/4" X 22 FT.
PUMP. SET 1- 4' X 20' HEATER TREATER + 2- H1-500 BBL Welded
STEEL TANKS. STARTED WELL PUMPING.

5-30-91 MADE 140 BBLs OIL.

5-31-91 MADE 71 BBLs OIL

6-1-91 MADE 22 BBLs OIL.

Will fill out form to ask for testing
allowable to determine if well is commercial

COPIED FOR RECORD

JUN 11 1991

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

SIGNED James Shug

TITLE Partner

DATE 6-5-91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: