

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

OPERATOR'S COPY

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-17807	
2. NAME OF OPERATOR Marshall & Winston, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 50880, Midland, Texas 79710-0880		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' FSL & 660' FEL		8. FARM OR LEASE NAME Anadarko Federal	
14. XXXXXXXX API No. 30-025-31501		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, ST, GR, etc.) GL= 3798'		10. FIELD AND POOL, OR WILDCAT Undesignated Delaware	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 15, T18S, R32E	
		12. COUNTY OR PARISH Lea	13. STATE New Mexico

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 checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

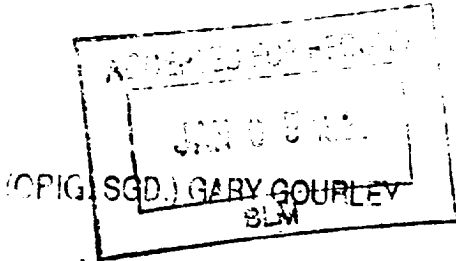
SUBSEQUENT REPORT OF:

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)	<input 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.)*

1. Set wireline CIBP @ 4910' & dump 35' cement on same.
2. Set wireline CIBP @ 3870' & dump 35' cement on same.
3. Perf 4 SPF @ 1235' & sqz. cement w/50 sxs Class "C" (leave 10 sxs in casing to provide 100' plug from 1135-1235').
4. Cut off casing 3' below final restored ground level - place 10 sxs cement in top of 5 1/2" casing.
5. Weld on cap & install dry hole markers (4" pipe - 10' in length - 4' above GL & embedded in cement).



RECEIVED
1998 JAN 21 P 3:21
BUREAU OF LAND MGMT.
1103RS, NEW MEXICO

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

SIGNED Clarence R. Chandler

TITLE Vice President

DATE 12/02/97

(This space for Federal or State office use)

COPIG. SGD. GARY GOURLEY

TITLE PETROLEUM ENGINEER

DATE JAN 05 1998

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side