

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLI
(Other instructions
reverse side)

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 ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR
ARMSTRONG ENERGY CORPORATION
3. ADDRESS OF OPERATOR
P. O. Box 1973, Roswell, New Mexico 88202-1973
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

Unit Letter L, 2086' FSL & 556' FWL

14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3699' KB 24' AGL

5. LEASE DESIGNATION AND SERIAL NO.
NM-0250
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
K. F. Quail Federal
9. WELL NO.
1
10. FIELD AND POOL, OR WILDCAT
South Lea San Andres
11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 1, T-20S, R-34E
12. COUNTY OR PARISH
Lea
13. STATE
N.M.

16. 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

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

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

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(Other) Temporary Suspension of Production

(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.) *

Current authorization to suspend production expires 5/31/93.
Operator recently purchased well and is in need of additional time
to adequately analyze potential of well.

APPROVED FOR 6 MONTH PERIOD
ENDING 11-30-93

I hereby certify that the foregoing is true and correct.

SIGNED

Robert G. Armstrong

TITLE President

DATE April 12, 1993

(This space for Federal or State office use)

APPROVED BY

DAVID R. OLSON

PETROLEUM ENGINEER

DATE

4/22/93

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side