Form 3160-5 (June 1990)	DEPARTN	INITED STATES IENT OF THE INTERIOR BUM - CARAGEMENT OF LAND MANAGEMENT	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No.
Do not use this f	6. If Indian, Allottee or Tribe Name		
1. Type of Well	7. If Unit or CA. Agreement Designation		
4 Location of Well (Footag 1650' FNL & Sec. 14, T-	ive West, Midlan Re. Sec. T., R. M. or Surve 1650' FEL 77 -20S, R-36E	y Description)	 8. Well Name and No. Sanderson A No. 13 9. API Well No. 300250426700 10. Field and Pool, or Exploratory Area Eunice Monument GB-SA 11. County or Parish, State Lea, NM 8. OB OTHER DATA
TYPE OF	SUBMISSION	TYPE OF ACTION	
🗌 Final Ab	ent Report andonment Notice	Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other Squeeze Perfs	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well
It is	proposed to squ ion in the expa	e all pertinent details, and give pertinent dates, including estimated date of starting eritical depths for all markers and zones pertinent to this work 1* eeze off the Queen perforations in this nsion area to the Eunice Monument South	Completion or Recompletion Report and Log form) any proposed work. If well is directionally drilled.

- RIH with bit and casing scraper to TOL at 3720'. 1.
- 2. Set RBP at 3575' and squeeze Queen perforations (3545'-50') with 75 sxs cement.
- Drill out cement and retainer.
- 4. Pressure test casing to 500 psi for 30 minutes.
- 5. RIH with bit and scraper to liner TD at 3920'. 6.
- RIH with producing equipment and resume production pending assumption of operatorship by Chevron.

14. I hereby certify that the foregoing is true and correct Signed	TitleRegulatory Coordinator	Date12-4-90
Approved by Conditions of approval, if any:	Title	Date 12.690
THIS APPROVAL IS FOR Title 18 U.S.C. Section 1001, makes it a crime for any person know or representations as to any matter within its jurisdiction.	THE PROPOSED REMEDIAL ingly and willfully to make to any department or agency of the U	- WORK . nited States any false. fictitious or fraudulent statements

DEC 1 2 1990 HOEBS OFNICE