

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. NM 03023-A
2. NAME OF OPERATOR Belco Petroleum Corporation	6. IF INDIAN, ALLOTTEE OR TRIBE NAME None
3. ADDRESS OF OPERATOR 2000 Wilco Building, Midland, Texas 79701	7. UNIT AGREEMENT NAME None
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL & 1300' FEL of Section 30, T-20-S, R-33-E, Lea County, New Mexico	8. FARM OR LEASE NAME Bass Federal
14. PERMIT NO.	9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3598.9' GL	10. FIELD AND POOL, OR WILDCAT South Salt Lake
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T-20-S, R-33-E
	12. COUNTY OR PARISH Lea
	13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Ran 5-1/2" Liner</u>	<input checked="" 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.)*

7/25/74: Ran 60 joints of 5-1/2", S-95, 16.8# per foot Hydril Liner set at 13,708'.
Top of Liner at 10,997' (203' overlap). Cemented with 260 sx. Class "H"
with 5# KCl per sack. Plug down at 12:30 A.M., 7/25/74.

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

SIGNED J. T. Hollen, Jr.
(This space for Federal or State office use)

TITLE Operations Engineer DATE 7/25/74

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

*See Instructions on Reverse Side

