

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC - 065447

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Sharp Nose Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Undes. Quail Ridge Morrow

11. SEC. T., R., M., OR BLK. AND
SURVEY OR ARMA

Sec 13, T-20-S, R-33-E

12. COUNTY OR PARISH

Lea

13. STATE

NM

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Collins & Ware, Inc.

3. ADDRESS OF OPERATOR

303 W. Wall, Suite 2200, Midland, TX 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

2395' FSL and 2065' FEL of Sec 13

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3610 G.L.

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

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

BOP PRESSURE RATING AFTER SETTING 8.625" CASING

Change from 10,000 psig equipment after 10,900' KB to leaving 5000 psig equipment intact; e.g. well will be drilled from appx. 5200' KB to total depth with 5000 psig equipment. (same as Six Shooter "13" No. 1).

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

SIGNED

TITLE Agent

DATE

12/13/91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

12-20-91