

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT-" for such proposals

*SUBMIT IN TRIPLICATE*

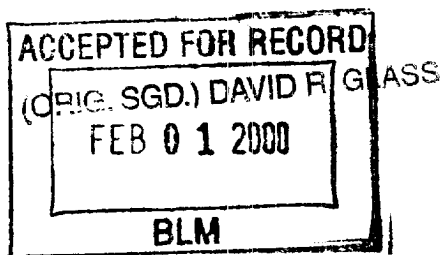
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. <b>NM 17238</b>
2. Name of Operator <b>Nearburg Producing Company</b>	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. <b>3300 N A St., Bldg 2, Suite 120, Midland, TX 79705 915/686-8235</b>	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>1900 FSL and 1650 FEL, Sec 3, T20S, R33E</b>	8. Well Name and No. <b>Python 3 Federal #1</b>
	9. API Well No. <b>30-025-34872</b>
	10. Field and Pool, or Exploratory Area <b>Teas Bone Spring</b>
	11. County or Parish, State <b>Lea County, NM</b>

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>Intermediate casing and cement</u>	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

01/26/00: Drilled to 3,230'. C&C hole. RU csg crew and ran 73 jts 8-5/8" 24# & 32#, J55, ST&C csg. Set casing at 3,230'. Cement casing using 909 sxs cmt + additives. Circ 145 sx cmt to surface. WOC. Cut off casing and weld on wellhead. NU BOPE and test.



14. I hereby certify that the foregoing is true and correct		
Signed <u>Kim Stewart</u>	Title <u>Regulatory Analyst</u>	Date <u>01/27/00</u>
(This space for Federal or State office use)		
Approved by _____	Title _____	Date _____
Conditions of approval, if any: _____		

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

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