

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OFFICE FOR NUMBER  
OF COPIES REQUIRED  
(Other instructions on reverse side)

Hot Roswell District  
Modified Form No. 30-025-08110  
NM60-3160-4

LEASE DESIGNATION AND SERIAL NO.  
NM-77058

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> <i>Re-entry</i>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Strata Production Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 1030, Roswell, New Mexico 88202-1030		8. FARM OR LEASE NAME Cercion Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>1985' FNL &amp; 657' FWL</i> <i>1980 660</i>		9. WELL NO. #7	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT East Livingston Ridge Delaware	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3678' GR		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 22-22S-32E	
		12. COUNTY OR PARISH Lea	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETION	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input checked="" type="checkbox"/>
(Other) <i>Re-entry</i>			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)			

(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.) \*

*see attached wellbore schematic* **(SJS)**  
Strata Production Company plans to re-enter the former John H. Trigg well located 1980/N 660/W  
~~1985' FNL & 657' FWL~~, Section 22, Township 22 South, Range 32 East, Lea County, New Mexico, in the following manner:

- 1) Dig out well head and nipple up to 8 5/8" surface casing.
- 2) Drill out plugs at surface, 590', 945', 4410' and 7313'. Circulate hole clean. TOH with drill string. (Will use a cut brine system).
- 3) Log and side-wall core zones of interest.
- 4) Run 5 1/2" 17# casing to TD and cement to surface. Will run a two (2) stage cement program.

*\* see attached <sup>copy 3</sup> log survey plat for corrected footages. E.P.*  
*oil conservation*

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

SIGNED *Carol J. Barui*

TITLE Production Supervisor

DATE 1/5/93

(This space for Federal or State office use)

APPROVED BY *[Signature]*  
CONDITIONS OF APPROVAL, IF ANY:

TITLE [Signature]

DATE 2-8-93

APPROVAL SUBJECT TO  
GENERAL REQUIREMENTS AND  
SPECIAL STIPULATIONS

\*See Instructions on Reverse Side

ATTACHED