

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE  
(Other instructions on  
reverse side)

Form approved  
Budget Bureau No. 1004-011  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

LC 030132 B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED  
(Do not use this form for proposals to drill or to deepen or plug back to a different depth dir.  
Use "APPLICATION FOR PERMIT..." for such proposals.)

RECEIVED  
SEP 5 10 05 AM '90  
CARR ARE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Closson "b"

9. WELL NO.  
3

10. FIELD AND POOL, OR WILDCAT  
Jalmat Yates SR

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA  
Sec 20-T22S-R 36E

12. COUNTY OR PARISH  
Lea

13. STATE  
NM

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Euratex Operating Company

3. ADDRESS OF OPERATOR  
410 17th St. # 2100, Denver, Co. 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
660' FNL & 330' FWL, Sec 20-T22S-R36E

14. PERMIT NO. \_\_\_\_\_ 15. ELEVATIONS (Show whether DF, RT, GR, etc.) \_\_\_\_\_

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) \_\_\_\_\_

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANS

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Test Casing & TA

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.)\*

- 8-15-90 - 1. Pulled Rods & Pump. Installed BOP Dug out celler.
- 2. Piped valves to surface; were 10 feet below ground level.
- 3. Pulled tubing
- 8-16-90 - 4. RIH w/ Baker N-1 CIBP. Set CIBP @ 3135'.
- 5. Cir. csg w/packer fluid. Test to 520 psi for 20 min. OK
- 6. Layed down tubing
- 7. RIH w/ 4 joints 2 3/8" tubing. flanged up well head
- 8. Work inspected & approved by Jack Johnson, Hobbs BLM

RECEIVED  
SEP 11 10 07 AM '90

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

SIGNED J. Wise TITLE Engineer DATE 8/28/90

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 8-5-90

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side