Form approved. Budget Bureau No. 1004-0135 Form 3168-5. November 1983) UNITE STATES SUBMIT IN TRIPLIC A' Expires August 31, 1985 DEPARTMENT OF THE INTERIOR (Other instructions Formetly 9-331) 5. LEASE DESIGNATION AND SERIAL NO. LC-031736(b) BUREAU: OF LAND MANAGEMENT 6. IF INDIAN, ACLOTTER OR TRIBE NAME SUNDRY NOTICES AND REPORTS ON WELLS form for proposals to drill or to deepen or plug back to a different reservoir.

Use "APPLICATION FOR PERMIT—" for such proposals.) (Do not use this 7. UNIT AGREEMENT NAME WELL X WELL | OTHER NAME OF OPERATOR ADDRESS OF OPERATOR roduction Company Hobbs NM 88240 LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) 1980' FNL x 1980' FWL, Sec. 22 (Unit F, SE/4, NW/4) 22-20-37 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 14. PERMIT NO. 12. COUNTY OR PARISH | 13. STATE 3549° ROB Zea 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PULL OR ALTER CASING TEST WATER SHUT-OFF WATER SHUT-OFF REPAIRING WELL PRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING SHOOT OF ACIDIZE ABANDON* SHOOTING OR ACIDIZING ABANDON MENT REPAIR WELL CHANGE PLANS (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) R COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting an if, well is, directionally drilled, give, subsurface locations, and measured, and true vertical depths for all markers and zones perti perforate additional Araylung San-Andres gas intervals and acid; KIH with but, Tag PBTD at 3706 and circ and clea intervalo 3653-57, 3661-67, 3671-79, 3684-89 an SPF using a 3/8 gun KIH with 2 1/8" they and sker, set sker at 3500. 3500 gals 15 % Hel W/add and 900 #'s graded nock brine. Flush to perfs with 17 bbls fresh salt in 900 gals 30 # gelled . 20% KCl. 5 Swab back acid load and attempt to sick off well flowing return to froduction 1-J. R. Barnett, How 1- F.J. Nash, How Rm 4.206 18. I hereby certify that the foregoing is true and correct (This space for Federal or State office use) DATE 11-7-89 APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: