Form 3160-5 (November 1983) (Formerly 9-331) UNITED STATES SUBMIT IN TRIPLICATE® (Other Instructions on re- BUREAU OF LAND MANAGEMENT	Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 LEASE DESIGNATION AND SHELL NO. NM-27805
SUNDRY NOTICES AND REPORTS ON WELLS (130 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.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
J. OII. GAM OTHER	7. UNIT AGREEMENT MAME
2. NAME OF OPERATUR	S. PARM OR LEASE NAME
Strata Production Company	Lechuza Federal
	#2
P. O. Box 1030, Roswell, New Mexico 88202-1030 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also apace 17 below.) At surface	10. FIELD AND FOOL, OR WILDCAT East Livingston Ridge
1650' FSL & 1650' FWL	11. SSC., T., E., M., OR BLE. ANDDELAWATE
K	Section 15-22S-32E
14. PERSIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
30-025-31603 3728' GR	Lea NM
16. Check Appropriate Box To Indicate Nature of Notice, Report, or O	ther Data
NOTICE OF INTENTION TO:	ENT REPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT	ALTERING CASING
HIIIDUT OR ACIDIZE ABANDON® BEOUTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL CHANGE PLANS (Other) Soud and Rur (Note: Report results (Note: Report results of Report results or Report re	of multiple completion on Well
17. DESCRIBE PROPUSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and size pertinent dates, proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical nent to this work.) 5/28/92 Soud 17 1/2" hole at 7:00 PM on 5/27/92. Drilling at	
Redbed. Mud wt. 9.0, Visc. 32.	
5/29/92 Drilling at 600', formation Anhydrite. Mud wt. 9.8, 15 joints of 13 3/8", 54.5#, J-55 casing. Cemented a HaliLite, 1/4# Flocele, 2% CaCL. Tailed in with 200 Circulated 150 sacks to pit. Plug down at 1:30 PM or Pressure test BOP and casing to 500#.	at 586' with 300 sacks sacks PP, 2% CaCL.
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TOTAL MENN SON	
8. I hereby certify that the foregoing is true and correct SIGNED	DATE 6/1/92
(This space for Federal or State office use)	
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE

*See Instructions on Reverse Side

RECEIVED JUN 1 8 1992

CO MODES STEE