

UNIT. STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on re-
verse side)

NM Roswell District
Modified Form No.
NM60-3160-4

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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		3a. Area Code & Phone No. 505-622-1127		5. LEASE DESIGNATION AND SERIAL NO. NM-27805	
2. NAME OF OPERATOR Strata Production Company				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 1030, Roswell, New Mexico 88202-1030				7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL & 2310' FEL <i>Unit 0</i>				8. FARM OR LEASE NAME Lechuza Federal	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3704' GR		9. WELL NO. #3	
				10. FIELD AND POOL, OR WILDCAT Livingston Ridge Delaware, East	
				11. SEC., T., R., N., OR BLK. AND SURVEY OR AREA Section 15-22S-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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) Supplemental to APD

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANE ☒

☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

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

17. DESCRIBE PROMISED 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.)*

SUPPLEMENTAL INFORMATION TO APPLICATION AND PERMIT TO DRILL

Change 12 1/4" hole size for 8 5/8" casing to 11" hole size for 8 5/8" casing.

Cementing Program:

Surface Casing 13 3/8:

300 sacks Halliburton Lite with 2% CaCL and 1/4# Flocele per sack, and 200 sacks Class "C" with 2% CaCL.

Intermediate Casing 8 5/8":

1300 sacks Halliburton Lite with 2% CaCL and 1/4# Flocele per sack, and 200 sacks Class "C" with 2% CaCL.

Production Casing 5 1/2":

First stage 800 sacks 50/50 Poz, 5# salt per sack and 1/4# Flocele per sack. Second stage 550 sacks 50/50 Poz with 5# salt per sack and 1/4# Flocele per sack.

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

SIGNED *Carol J. Garcia*

TITLE Production Supervisor

DATE 10/7/92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side