

N. M. OIL CONS. COMMISSION
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on reverse 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. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR: Strata Production Company

3. ADDRESS OF OPERATOR: 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 space 17 below.)
At surface: 330' FNL & 330' FEL

14. PERMIT NO.: 30-025-31849 ✓

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3695' GR

5. LEASE DESIGNATION AND SERIAL NO.: NM-77058

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME: Cercion Federal

9. WELL NO.: #5

10. FIELD AND POOL, OR WILDCAT: East Livingston Ridge Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Section 21-22S-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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Run 5 1/2 casing and cement</u>	<input checked="" type="checkbox"/>

(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.)

02/17/93: Drilled to 8770' TD. Ran 61 joints 5 1/2" 17# L80 casing and 150 joints 5 1/2" 17# J55 casing. Cemented at 8770' first stage with 500 gal Super Flush, 50 sacks Scavenger cement, 660 sacks 50/50 Poz "H" with 5# salt, .3% Halaide-322, 10# Microbond and 1/4# Flocele per sack. Cemented second stage with 375 sacks Hal Lite with 8# salt and 1/4# Flocele per sack. Tail in with 100 sacks Class "C" Neat. Circulated 175 sacks to pit on first stage. Plug down first stage at 8:15 PM on 2/16/93 and second stage at 1:15 AM on 2/17/93. WOC. Released rig at 5:15 AM on 2/17/93.

ACCEPTED FOR RECORD
(ORIG. SGD.) DAVID E. GLASS
MAR 19 1993
CARLSBAD, NEW MEXICO

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

SIGNED Carol J. Garcia TITLE Production Supervisor DATE 3/16/93

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED

MAR 26 1998

SCD HOBSB OFFICE