

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

U.S. Oil Cons. D. 1990
1625 N. French Dr.
Albuquerque, NM 88240

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
Oil Gas
☒ Well ☐ Well ☐ Other
2. Name of Operator
STRATA PRODUCTION COMPANY
3. Address and Telephone No.
P. O. Box 1030
Roswell, New Mexico 88202-1030 505-622-1127
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1683' FNL & 1650' FWL
Section 4-21S-32E
5. Lease Designation and Serial No.
NM-14791
6. If Indian, Allottee or Tribe Name
7. If Unit or CA, Agreement Designation
8. Well Name and No.
New Mexico A Federal #1
9. API Well No.
30-025-24374
10. Field and Pool, or Exploratory Area
Hat Mesa Delaware
11. County or Parish, State
Lea County, New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION		TYPE OF ACTION	
<input checked="" type="checkbox"/>	Notice of Intent	<input type="checkbox"/>	Abandonment
<input type="checkbox"/>	Subsequent Report	<input type="checkbox"/>	Recompletion
<input type="checkbox"/>	Final Abandonment Notice	<input type="checkbox"/>	Plugging Back
		<input type="checkbox"/>	Casing Repair
		<input type="checkbox"/>	Altering Casing
		<input checked="" type="checkbox"/>	OTHER
			Place on Production
		<input type="checkbox"/>	Change of Plans
		<input type="checkbox"/>	New Construction
		<input type="checkbox"/>	Non-Routine Fracturing
		<input type="checkbox"/>	Water Shut-Off
		<input type="checkbox"/>	Conversion to Injection
		<input type="checkbox"/>	Dispose Water

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

13. 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.)*

Strata Production Company plans to rework and place well on production dependent upon working interest owners' approval.

14. I hereby certify that the foregoing is true and correct
- Signed Carol J. Garcia Title Production Records Manager Date 2/22/2000

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: _____

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division

P.O. Box 1,
Hobbs, NM 88241

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

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Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Gas

Well ☐ Well ☒ Other Plug and Abandon

2. Name of Operator

STRATA PRODUCTION COMPANY

3. Address and Telephone No. P. O. Box 1030 505-622-1127
Roswell, New Mexico 88202-1030

4. Location of Well (Footage, Sec, T., R., M., or Survey Description)

1683' FNL & 1650' FWL
Section 4-21S-32E

5. Lease Designation and Serial No.

NM-14791

6. If Indian, Allottee or Tribe Name

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New Mexico A Federal #1

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10. Field and Pool, or Exploratory Area

Hat Mesa Delaware

11. County or Parish, State

Lea County, New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☒ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ OTHER
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

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

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Due to current economic conditions, Strata Production Company requests a six (6) month extension to plug and abandon the well.

14. Signed Carol J. Garcia Title Production Records Manager Date 9/1/98

(This space for Federal or State office use)

Approved by (ORIG. SGD) DAVID R. GLASS Title Assistant Secretary Date OCT 05 1998

Conditions of approval, if any:

Title 18 U.S.C. Section 1001 makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or reports, or to furnish any false information which may be used by such department or agency in its jurisdiction.

SEE ATTACHED FOR CONDITIONS OF APPROVAL FOR TA Instruction on Reverse Side