

DEPARTMENT OF THE INTERIOR

(Other instructions on reverse side)

BUREAU LAND MANAGEMENT

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.)

RECEIVED

Nov 7 10 45 AM '88

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. LC 065525
2. NAME OF OPERATOR Bravo Energy Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME -----
3. ADDRESS OF OPERATOR P. O. Box 2160, Hobbs, N. M. 88241	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  Unit N, 4195' FNL & 2310' FWL Sec. 1, T21S, R37E	8. FARM OR LEASE NAME Coogan Federal
14. PERMIT NO.	9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3530.8 GL	10. FIELD AND POOL, OR WILDCAT Wantz Abo
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1, T21S, R37E
	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

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other) Test Csg & Cement Job

(Other)

(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.)\*

1. Spud 12-1/4" hole.

2. Set 8-5/8" 24# J55 ST&C Csg. @ 1588'.

3. Cement Csg. with 400 sx. of 35/65 Light Weight Cement + 200 Sx. Class C. Circulated 110 sx. to surface. WOC 12-1/4 hrs.

4. Tested Csg. & BOP to 1500# for 30 minutes. Held OK

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

SIGNED

*J. R. Janice*

TITLE

Vice President

DATE

11-3-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

535