



P. O. Box 1498 ROSWELL, NEW MEXICO 88202-1498
505/623-5070 505/746-2719
ROSWELL, NM ARTESIA, NM

NOTARY PUBLIC

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP
(Office of Operations)
Version 1.0

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F*

Form approved,
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-14791

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

New Mexico Federal

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

Hat Mesa Delaware

11. SEC., T., R., M., OR BLM, AND
SURVEY OR AREA

4, T21S, R32E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Strata Production Company

3. ADDRESS OF OPERATOR

648 Petroleum Building Roswell, NM 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below)
At surface

330' FNL & 860' FWL

14. PERMIT NO.

15. ELEVATIONS (Give whether TD, GR, or etc.)

3646 Gr

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 COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

X

OTHER

(Other)

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Identify well and 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.) It is Strata's intention to amend APD filed on 12-26-90 to the following casing program:

DEPTH	HOLE SIZE	CASING SIZE	CEMENT
0 - 350'	17 1/2"	13 3/8" 48#	CIRCULATE
351 - 3175'	12 1/4"	8 5/8" 24#	CIRCULATE
3176 - 8450'	7 7/8"	5 1/2" 17#	500 sx "Lite", 365 sx "C" & tie into intermediate.

2.) The mud program to be used with the above is as follows:

DEPTH	TYPE	CHLORIDES	WT	VIS	WL
0 - 425'	NATIVE				
426 - 3175'	CUT BRINE	50 - 80K			
3176 - 6550'	CUT BRINE	50 - 80K			
6551 - 8450'	BRINE W/STARCH	80 -100K	9.8	32-34	10-12
TD	BRINE W/STARCH	80 -100K	9.8	38	± 10

3.) No other provision changed.

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

SIGNED James G. McClelland

TITLE Vice President

DATE 2/07/91

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE 2.5.91

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 ☐	5. LEASE DESIGNATION AND SERIAL NO. NM-14791
2. NAME OF OPERATOR Strata Production Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 648 Petroleum Building Roswell, NM 88201	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 330' FNL & 860' FWL	8. FARM OR LEASE NAME New Mexico Federal
14. PERMIT NO.	9. WELL NO. 5
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3646' GR	10. FIELD AND POOL, OR WILDCAT Hat Mesa, Delaware
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 4, T21S, R32E
	12. COUNTY OR PARISH LEA
	13. STATE NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☒
(Other) ☐	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(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.) Amend APD filed 12-26-90 to reflect proposed depth of 8450'.

RECEIVED
FEB 5 11 35 AM '91
CARBON COPY
AREA OFFICE

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

SIGNED James B. McElroy TITLE Vice President

DATE 2-04-91

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE 2-04-91