

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLI
(Other instructions
reverse side)

Budget Data on N-1004-1
Expires August 31, 1985
LEASE DESIGNATION AND SERIAL

NM-64602

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lincoln Federal Unit

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undes. Bilbrey Morrow Gas

11. SEC. T. R. M. OR BLE. AND
SURVEY OR AREA

Sec. 26, T-21-S, R-32-E

12. COUNTY OR PARISH; 13. STATE

Lea

N.M.

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

Collins & Ware, Inc.

3. ADDRESS OF OPERATOR

600 W. Illinois, Suite 701, Midland, Texas 79701

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

1980' FSL and 660' FWL of Section 26

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3709.8' GL

16. 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 (Fully 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.)

Received verbal approval from Mr. Bill McMannas with the BLM to run 61# 13 3/8" casing, instead of 68# 13 3/8" casing.

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

SIGNED

Sheryl L. Jones

TITLE Agent

DATE 4/3/91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE 4-11-91

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

SECRET

APR 15 1991

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