

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		N.M. OIL CONS. COMMISSION	
2. NAME OF OPERATOR Euratex Operating Company		P.O. BOX 1980 HOBBS, NEW MEXICO 88240	
3. ADDRESS OF OPERATOR 1801 Broadway, Suite 1200, Denver, CO 80202			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL & 660' FEL, Sec 30-T22S-R36E			
14. PERMIT NO.		15. ELEVATIONS (Show whether OP, RT, CR, etc.)	
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:

TEST WATER SHUT-OFF

PCLL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDISE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

Pressure Test Casing

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDISING

(Other)

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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 screen pertinent to this work.)

Note: Well was officially TA'ed and approved by BLM on September 5, 1990, with a CIBP set at 3286'. Casing was pressured tested at that time.

Proposed Work:

1. Check fluid level in casing.
2. Rig up pump truck with chart recorder and pressure test casing to 500 psi for 30 min.
3. Rig down pump truck and return to TA'ed status.

Work to be completed within 60 days of receiving BLM approval.

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

SIGNED

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

