

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP DATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-013  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.  
LC-030556 (b)  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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  
Evans & Guy Oil Co.  
3. ADDRESS OF OPERATOR  
c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241  
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below)  
At surface  
660' FNL & 1980' FWL Sec. 20

14. PERMIT NO.  
API #30-025-09361  
15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3442 DF

7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Stevens B-20  
9. WELL NO.  
1  
10. FIELD AND POOL, OR WILDCAT  
Jalmat Yates-SR  
11. SEC., T., R., N., OR BLK. AND SURVEY OR AREA  
Sec. 20, T23S, R36E  
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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANT

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Return to Production

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)

Ran rods & tubing. Well returned to production. 9/5/89 pumped 2 bbls oil, trace water, 7 MCF gas.

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

SIGNED

*Donna J. Salts*

TITLE Agent

DATE 9/13/89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

SJS

RECEIVED  
SEP 14 11 10 AM '89  
C/O  
AGG.