Form 3160-5
(November 1983)
(Formerly 9-331)

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP (Other instruction reverse side)

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 [X] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME:

2. NAME OF OPERATOR: Evans & Guy Oil Company

8. FARM OR LEASE NAME: Stevens B-20

3. ADDRESS OF OPERATOR: c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241

9. WELL NO.: 1

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

10. FIELD AND POOL, OR WILDCAT: Jalmat Tyates -SR

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 20, T23S, R36E

14. PERMIT NO.: API #30-025-09361

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3442 DF

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) Return to production	XX
(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.)*

Installed pumping unit. Ran tubing, rods & pump .
Well returned to production 2/2/89. 2/14/89 pump
7bbls oil, trace water, 20 MCF gas, 24 hours.

RECEIVED
1989 MAR 23 AM 8:30

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

SIGNED Donna Dalles TITLE Agent DATE 2-20-89

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side