

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Zia Energy, Inc.		8. FARM OR LEASE NAME Penrose	
3. ADDRESS OF OPERATOR P. O. Box 2219, Hobbs, NM 88240		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>unit E</i>		10. FIELD AND POOL, OR WILDCAT Paddock	
14. PERMIT NO. 2086' FNL & 776' FWL		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 9-T22S-R37E	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3424' KB		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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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. Rigged up pulling unit on 5/16/90. Pumped out of hole with rods, pump and tubing. Installed BOP. Rigged up and perforated additional zones in the Paddock formation from 5080' to 5050'.
2. Rigged up Western Company. Acidized using 4000 gals of 15% HCL acid. Reran tubing, rods and pump. Removed BOP. Placed well on production to recover load water and acid water and to test.

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

SIGNED <i>Jarvis Nelson</i>	TITLE <u>Engineer</u>	DATE <u>6/13/90</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

RECEIVED

JUN 14 10 50 AM '90

OFFICE OF THE
BUREAU OF LAND MANAGEMENT