

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Oil Cons. Division
1625 N. French Dr
Hobbs, NM 88240

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-25465
2. Name of Operator TCCO L. L. C.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. c/o Oil Reports & Gas Services, Inc., P. O. Box 755, Hobbs, NM 505/393-2727	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1650' FSL & 660' FEL of Sec. 25, T23S R33E	8. Well Name and No. Mary Federal #3
	9. API Well No. 30-025-27479
	10. Field and Pool, or Exploratory Area Wildcat
	11. County or Parish, State Lea Co., New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other _____	<input type="checkbox"/> Dispose Water
		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

Cut and pull 4 1/2" casing @ 490' and set plug from 550' to surface.

Verbal given by BLM/David Glass 11/29/99.

14. I hereby certify that the foregoing is true and correct		
Signed <u>David H. Glass</u>	Title <u>Agent</u>	Date <u>11/18/99</u>
(This space for Federal or State office use)		
Approved by <u>(ORIG. SGD.) DAVID H. GLASS</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>NOV 29 1999</u>
Conditions of approval, if any:		

SEE ATTACHED FOR

CONDITIONS OF APPROVAL

Title 18 U.S.C. Section 1001 makes it unlawful for any person to make any statement to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within the jurisdiction of the department or agency.

*See Instruction on Reverse Side

1-10-1933
DEC 01 1933
BLM
ROSWELL, NM

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