

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instruction
verse side)

Form approved 05-023-21003
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS 88240

(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 STRATA PRODUCTION COMPANY		8. FARM OR LEASE NAME Uraca Federal	
3. ADDRESS OF OPERATOR 648 Petroleum Building, Roswell, N.M. 88201		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' FSL & 1980' FWL		10. FIELD AND POOL, OR WILDCAT Wildcat, Delaware	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 11, T23S, R32E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3728' gl		12. COUNTY OR PARISH Lea	
		13. STATE N.M.	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <u>Re-enter</u> <input checked="" type="checkbox"/>	XX <input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <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 and 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.) *

We propose to reenter by drilling out plugs and cleaning out the hole to approximately 8700' then perforate and stimulate as needed for production. This well was previously designated the Happy Oil Company, Triste Draw Federal #1.

Mud Program: Cut brine to TD

BOP will be installed, See Exhibit "B"

Casing Program: 7 5/8" casing will be run and tied on to old 7 5/8" casing stub at 3600'

Logs to be run: GR, CCL, and CBL if necessary.

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS
ATTACHED

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

SIGNED <u>James G. McClellan</u>	TITLE <u>Vice-President</u>	DATE <u>11/13/90</u>
(This space for Federal or State office use)		
APPROVED BY <u>James G. McClellan</u>	TITLE <u>AREA MANAGER</u>	DATE <u>12.6.90</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side