

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLI E*
(Other instructions on re-
verse side)

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"/> | | 5. LEASE DESIGNATION AND SERIAL NO. 2 NM 03326 | |
| 2. NAME OF OPERATOR Tempo Energy, Inc. | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME ----- | |
| 3. ADDRESS OF OPERATOR 4000 N. Big Spring, Suite 109, Midland, TX 79705 | | 7. UNIT AGREEMENT NAME ----- | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650' FNL & 1650' FWL of Sec. 35, T23S, R32E | | 8. FARM OR LEASE NAME Payne Federal | |
| 14. PERMIT NO. Approved 7-11-85 | | 9. WELL NO. 5 | |
| 15. ELEVATIONS (Show whether DF, WT, GR, etc.) 3671.4' GR, 3684' KB | | 10. FIELD AND POOL, OR WILDCAT Triste Draw | |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 35, T23S, R32E | |
| | | 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 type="checkbox"/> | ABANDONMENT* <input checked="" type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <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.)*

In accordance with verbal approval given by Mr. Bob Pitschke, the well was plugged as follows:

1. Set 1st plug from 4600' to 4500', WOC 4 hours.
2. Set 2nd plug from 2600' to 2500', WOC 4 hours.
3. Set 3rd plug from 1150' to 1050', spotted 10 sacks of cement in the top of the 9 5/8" casing and erected the plug and abandon marker.
Plugged and Abandoned 8-14-85. Final Report.



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|---|--------------------------|---------------------|--|
| 18. I hereby certify that the foregoing is true and correct | | | |
| SIGNED <u>[Signature]</u> | TITLE <u>President</u> | DATE <u>8-21-85</u> | |
| (This space for Federal or State office use) | | | |
| APPROVED BY <u>[Signature]</u> | TITLE <u>[Signature]</u> | DATE <u>7-7-86</u> | |
| CONDITIONS OF APPROVAL, IF ANY: | | | |

*See Instructions on Reverse Side