

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on
reverse 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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <u>Drilling</u>		5. LEASE DESIGNATION AND SERIAL NO. NM#19143	
2. NAME OF OPERATOR Diamond Shamrock Exploration Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 400, Amarillo, Texas 79188-0001		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		8. FARM OR LEASE NAME Federal	
10. FIELD AND POOL, OR WILDCAT Antelope Ridge - Atoka Antelope Ridge - Morrow		9. WELL NO. #1	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec, 3, T23S, R34E		12. COUNTY OR PARISH Lea	
13. STATE NM		14. PERMIT NO. N/A	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3389' GR		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) <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 checked="" type="checkbox"/>
(Other) <u>Set & test casing</u>	

(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.) *

11-23-85
to
12-28-85
12-29-85
12-30-85
to
12-31-85
Drill from 4850' to 11,700' w/brine water (12 1/4" bit).
Log well (Dual Laterlog/SP/GR-CNL/CDL/GR).
Run 9 5/8" csg. as follows (bottom to top):
Float shoe
81' 9 5/8" 47# P-110 LT&C
Float collar
1642' 9 5/8" 47# P-110 LT&C
2995' 9 5/8" 43# S-95 LT&C
1831' 9 5/8" 40# S-95 LT&C
5074' 9 5/8" 40# N-80 LT&C
84' 9 5/8" 47# P-110 LT&C
Land @11,700'
Cement by Halliburton w/460 sx 50/50 Poz w/6% Halad 22A, .4% CFR-2 and
1770 sx Class "H" w/.6% Halad 22A, .4% CFR-2
1-01-86 Run Temp Survey, indicated cmt. top @7200'.
1-01-86
to
1-03-86 NU BOP. Test pipe blind rans, & manifold to 10,000 psi. Test annular pre-
venter to 3500 psi. Test csg. to 3500 psi w/10ppg brine for 1 hour.

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

SIGNED Craig Mickleberry TITLE Drilling Engineer III DATE _____
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED
JAN 17 1986
C.O.D.
HOBB'S OFFICE