

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND AMANGEMENT

N.M. OIL CONS. COMMISSION  
P.O. BOX 1980  
HOBBS NEW MEXICO 88240  
FORM APPROVED  
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 Oil <input type="checkbox"/> Gas <input type="checkbox"/> <input checked="" type="checkbox"/> Well <input type="checkbox"/> Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-85939
2. Name of Operator STRATA PRODUCTION COMPANY	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Box 1030 Roswell, New Mexico 88202-1030 505-622-1127	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 990' FSL & 330' FEL Section 10-23S-32E	8. Well Name and No. Colibri Federal #1
	9. API Well No. 30-025-31968
	10. Field and Pool, or Exploratory Area Diamondtail Delaware
	11. County or Parish, State Lea County, New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> OTHER <u>Place on Production</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<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.)\*

- 12/01/95: TOH with tubing.
- 12/04/95: TIH with tubing, rods and pump.
- 12/05/95: Set pumping unit.
- 12/06/95: Set motor.
- 12/07/95: Started pumping unit. Well placed on production.

*J. Lee*

RECEIVED  
 FEB 2 10 48 AM '96  
 CAROL ANNE  
 1995

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

Signed Carol J. Garcia Title Production Records Manager Date 1/31/96

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Conditions of approval, if any:

