

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division  
P.O. Box 1986  
Hobbs, NM 88241  
FORM APPROVED  
Bureau Form No. 1004-0135  
Expires: March 31, 1993  
Lease Designation and Serial No.  
88241 LC-068281

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 Well  Gas Well  Other

2. Name of Operator

QUAY VALLEY, INC.

3. Address and Telephone No.

P. O. BOX 10280, MIDLAND, TEXAS 79702 915/687-4220

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

760' from the North line and 2002' from the West line.  
Section 31, T26S, R32E

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
RUSSELL 31 FEDERAL #3

9. API Well No.  
30-025-08303

10. Field and Pool, or Exploratory Area  
BATTLEAXE DELAWARE

11. County or Parish, State  
LEA COUNTY, NM

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

TYPE OF SUBMISSION

Notice of Intent  
 Subsequent Report  
 Final Abandonment Notice

TYPE OF ACTION

Abandonment  
 Recompletion  
 Plugging Back  
 Casing Repair  
 Altering Casing  
 Other  
 Change of Plans  
 New Construction  
 Non-Routine Fracturing  
 Water Shut-Off  
 Conversion to Injection  
 Dispose Water

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.)

1. Set CIBP @ 4175' capped with 35' of cement.
2. Load hole w/9.0#/gal mud laden fluid.
3. Pump 100' plug (25sxs) @ 1050'; top of salt. Woc and tag.
4. Pump 100' plug (25sxs) @ across 8-5/8" csg shoe (404'-304') woc & tag.
5. Pump 10sx plug from 30' to surface.
6. Cut off wellhead, weld on marker.
7. Backfill and level location.

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

Signed [Signature] Title OPERATIONS MANAGER Date 11/30/98

(This space for Federal or State office use)

Approved by (ORIG. SGD.) DAVID R. GLASS Title [Signature] Date DEC 07 1998  
Conditions of approval, if any:

SEE ATTACHED

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