

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. CONS. COM. OK 7
P.O. BOX 1980
HOBBS NEW MEXICO 88249-26

FORM APPROVED
Budget 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 <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other WIW CONVERTED TO OIL WELL	5. Lease Designation and Serial No. NM 224918
2. Name of Operator ZIA MINERALS LTD. CO. K 1371	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 3500 ACOMA HOBBS, NM 88240 505-397-7750	7. If Unit or CA, Agreement Designation 8910123940
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SEC 17, T-23S, R-37E -1980 FEET FROM THE NORTH LINE AND 1800 FEET FROM THE WEST LINE	8. Well Name and No. 8
	9. API Well No. 30-025-10771
	10. Field and Pool, or Exploratory Area LANGLIE-MATTIX
	11. County or Parish, State LEA COUNTY, NEW MEXICO

12. **CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OF 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 WIW TO PRODUCER
	<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.)*

6/11/96 RELEASE PACKER - LAY DOWN TUBING - REPERFORATE THE FOLLOWING INTERVALS, 3447-56, 3459-60, 3468-82
6/12/96 PINPOINT PERFS AND ACIDIZE WITH A TOTAL OF 2800 GALS 15% HCL SWIC ACID RIH WITH TUBING, PUMP AND RODS
6/13/96 BEGAN PUMPING WELL FOR PRODUCTION

ZIA MINERALS LTD. CO. ACCEPTS ALL RESPONSIBILITY FOR THE ABOVE OPERATIONS. WE OPERATE UNDER FEDERAL PLUGGING BOND NM 2349. PLEASE MAKE THIS CHANGE FROM WIW TO OIL PRODUCING WELL EFFECTIVE 6/13/96.

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

Signed *[Signature]* Title MEMBER Date 6/24/96

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

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.

*See Instruction on Reverse Side

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