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		10. W. Was Ville Desire Collection	
Form 3160-5 (June 1990)	DEPARTMEN	P. O. BOX 1980 FED STATES HORBS NEW MEXICO 382 TOF THE INTERIOR LAND MANAGEMENT	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. 1 C-049439B
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			6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE			7. If Unit or CA, Agreement Designation
1. Type of Well X Well			8. Well Name and No. G. D. Riggs B #8 9. API Well No.
3. Address and Telephone No. P.O. Box 730, Hobbs, NM 88240 505-397-0428			3 - 30-025-11966 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330'FNL & 1650' FEL Unit B, Sec 1, T-26-S, R-37-E			Lea
12.	CHECK APPROPRIATE BOX	s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
	TYPE OF SUBMISSION	TYPE OF ACTION	
	Notice of Intent	Abandonment	Change of Plans
	X Subsequent Report	Recompletion Plugging Back	New Construction Non-Routine Fracturing Water Shut-Off
	Final Abandonment Notice	Casing Repair Altering Casing Cother Abandon LM Queen Zone	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
02-02/3 1) Set RB 100 sx cl 2) Drill ou 3) Test 5 (Chart 4) Remov 5) Run pr 6) Turn w	e subsurface locations and measured and true verting 23–93 IP @ 5060' & cement retainer @ lass C cement – reverse out 3 let cmt retainer to 5060'. If 1/2" casing 5060'to surface to attached w/copy on reverse to RBP @ 5060', clean out to 58 location equipment – set pumity ell over to ARCO.	700# 30 min, held OK. side)	OF ASS
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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.

Title

Title.

Engr Asst

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

(This space for Federal or State office use)

Approved by ________ Conditions of approval, if any:

Date

