

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR
(Other instructions on re-
verse side)

Form approved.
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 ☐ GAS WELL ☐ OTHER Water Injection

2. NAME OF OPERATOR
Sirgo Operating, Inc.

3. ADDRESS OF OPERATOR
P.O. Box 3531, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
Unit L, 2310 FSL 990 FWL

14. PERMIT NO.
30025 123 64

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5. LEASE DESIGNATION AND SERIAL NO.
LC-067164

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
West Dollarhide Queen Sand

8. FARM OR LEASE NAME
Unit

9. WELL NO.
61

10. FIELD AND POOL, OR WILDCAT
Dollarhide Queen

11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA
Sec. 5, T25S R38E

12. COUNTY OR PARISH
Lea

13. STATE
NM

10. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Pressure test	☒
(Other)	☐			(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.)*

6-28-90 MI&RU PU. Bleed well down. RIH w/5-1/2" CIBP @ 3325'. Pull up 1 jt. Circ treated fluid. NU wellhead. Load & pressure tbg to 500# for 17 min - okay. POH & LD tbg. NU wellhead. RD.

T.A. STATUS.

RECEIVED
JUL 3 10 46 AM '90
OFFICE AREA

APPROVED FOR 12 MONTH PERIOD

ENDING 6/30/91

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

SIGNED Bonnie (L)water

TITLE Production Technician

DATE 7-2-90

(This space for Federal or State office use)

APPROVED BY C. S. [Signature]

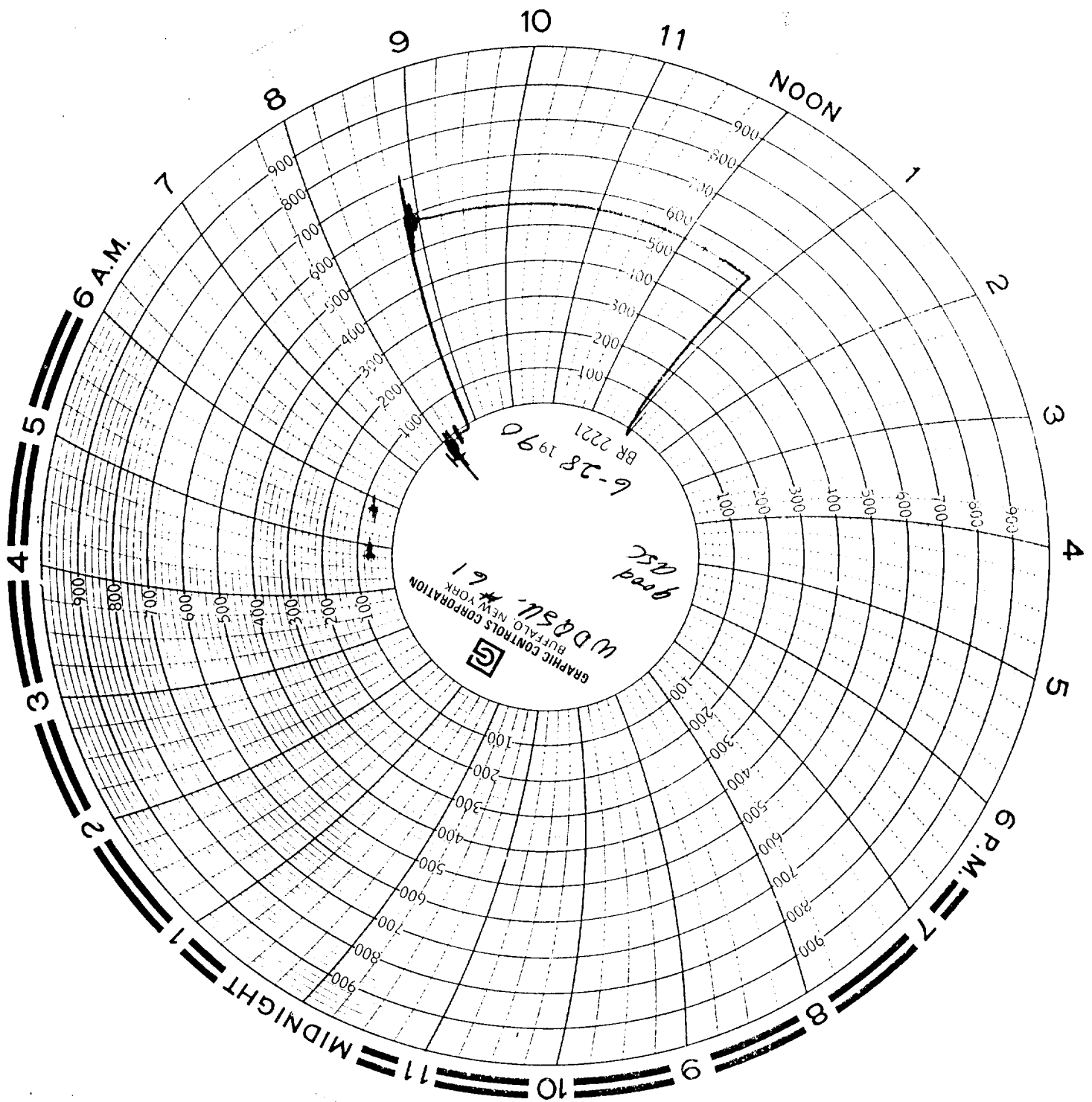
TITLE PETROLEUM ENGINEER

DATE 7-17-90

CONDITIONS OF APPROVAL, IF ANY:

Subject to
Like Approval
by [Signature]

*See Instructions on Reverse Side



RECEIVED

JUL 18 1990

CCC
FOBBS OFFICE