

Form 3160-5
(July 1989)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT REFINING
OFFICE FOR THE
OF COPIES REQUIRED
(Other instructions on re-
verse side)

BLM Roswell District
Modified Form No.
NMXO-3160-4

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR United Gas Search, Inc.		3a. Area Code & Phone No. 505-393-2727	8. FARM OR LEASE NAME Leonard Federal
3. ADDRESS OF OPERATOR P. O. Box 755, Hobbs, New Mexico 88241		9. WELL NO. 12	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 1980' FWL Sec. 14 Unit K		10. FIELD AND POOL, OR WILDCAT South Leonard Queen	
14. PERMIT NO. 30-025-25837		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 14, T26S, R37E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 2990 GR		12. COUNTY OR PARISH Lea	13. STATE NM

16. 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

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANE

(Other) Set Bridge Plug

(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.)*

Work began 9/27/90. Set ret. bridge plug at 3486.
Treated perfs 3384 - 3487 with 2,000 gallons 15%
HCL acid. 10/1/90 pumped 1 bbl oil, 50 bbls water
24 hours.

RECEIVED
NOV 30 11 45 AM '90
CARL AREA
JOE

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

SIGNED

James H. Hall

TITLE

Agent

DATE

11/28/90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side