

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CONTACT RELATIVE  
OFFICE FOR NUM  
OF COPIES REQUIRED  
(Other instructions on re-  
verse side)

BLM Roswell District  
Modified Form No.  
NMX-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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER                                                |  | 3a. Area Code & Phone No.<br>505-393-2727                |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>NM-7951                       |
| 2. NAME OF OPERATOR<br>United Das Search, Inc                                                                                                                   |  |                                                          |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                 |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 755, Hobbs, NM 88241                                                                                                        |  |                                                          |  | 7. UNIT AGREEMENT NAME                                               |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>1980' FNL & 2180' FWL |  |                                                          |  | 8. FARM OR LEASE NAME<br>Leonard Brothers                            |
| 14. PERMIT NO.<br>API #30-025-25860                                                                                                                             |  | 15. ELEVATION (Show whether OF, RT, OR, etc.)<br>3008 KB |  | 9. WELL NO.<br>21                                                    |
|                                                                                                                                                                 |  |                                                          |  | 10. FIELD AND POOL, OR WILDCAT<br>Rhodes Yates SevenRivers           |
|                                                                                                                                                                 |  |                                                          |  | 11. SEC., T., R., M., OR BLM, AND SURVEY OR AREA<br>Sec 14 T26S R37E |
|                                                                                                                                                                 |  |                                                          |  | 12. COUNTY OR PARISH<br>Lea                                          |
|                                                                                                                                                                 |  |                                                          |  | 13. STATE<br>NM                                                      |

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)

(Other) Recomplete to Rhodes Yates-SR

(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 10/4/90. Set CIBP @ 3100, cap with 35' cement.  
Perforated 2644-48, 2658-64, 2672-76, 2684-86, 2700-12,  
2798-2810, 2860-70, 2930-38 with 1 shot per foot, Shut-In  
waiting on frac treatment. 6/21/91 Treated with 1,000 bbls  
gelled water & 155,000# 20/40 sand. Maximum pressure 2200#.  
6/22/91 Flowed 3200 MCF gas per day thru 24/64" choke, FCP 605#.

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

SIGNED

TITLE Agent

DATE 6-25-91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

EXHIBIT E