

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECF G
OFFICE FOR M R
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 checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		3a. Area Code & Phone No.	
2. NAME OF OPERATOR United Gas Search, Inc.		505-393-2727	
3. ADDRESS OF OPERATOR P. O. Box 755, Hobbs, New Mexico 88241-0755		8. FARM OR LEASE NAME Leonard Brothers	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 2080' FWL Unit C		9. WELL NO. 24	
14. PERMIT NO. 30-025-25960		10. FIELD AND POOL, OR WILDCAT South Leonard Queen	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 2993 GR		11. SEC., T., R., W., OR BLE. AND SURVEY OR AREA Sec 14 T26S R37E	
12. COUNTY OR PARISH Lea		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	FILL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Recomplete to Yates	X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(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.)

35'
It is proposed to run electric log, set CIBP at 3050, cap with 3' cement, perf Yates as indicated by log, test for production.

RECEIVED

SEP 17 8 23 AM '90

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

SIGNED Wanda Hall
(This space for Federal or State office use)

TITLE Agent

DATE 9/13/90

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE PETROLEUM ENGINEER

DATE 9-18-90

*See Instructions on Reverse Side

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HOUSE OF RE