

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

Lease Designation and Serial No.
NMNM029050

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

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

MCCASLAND MANAGEMENT, INC.

3. Address and Telephone No

PO BOX 206 EUNICE NM 88231 (505) 394-2553

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1838' FSL&2122' FEL
T26S-R37E-Mer.NMP-S29-NWSE

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

FEDERAL F #4

9. API Well No.

30-025-26061

10. Field and Pool, or Exploratory Area

11. County or Parish, State

LEA

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

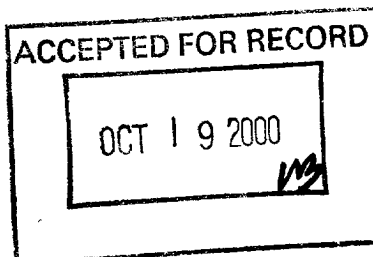
TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Well back in production
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form 1)

13. 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.)*

A & M Machine Works set reworked pumping unit - work completed 8/9/00. Well would not pump. Eunice Well Servicing pulled well on 9/18-19/00. See copies of tickets (attached) for work done. Well is now back in production.



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

Signed Erene McCasland

Title President

Date 10/3/00

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

OR Title _____
Date _____

Date 10/23/2000

Title 18 U.S.C. Section (100), 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.

*See instruction on Reverse Side