H. M. B.L BUAD BEHARDMEN P. O. BOX 181 Form 9-331 (May 1963) DEPARTMENT OF THE INTERIOR verse side) CO OF Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY NM-28052 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 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.) 7. UNIT AGREEMENT NAME WELL X GAS WELL OTHER 2. NAME OF OPERATOR 8. FARM OR LEASE NAME Lewis B. Burleson, Inc. Donna Federal 3. ADDRESS OF OPERATOR 9. WELL NO. 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface P.O. Box 2479 1 10. FIELD AND POOL, OR WILDCAT Jalmat 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 990' FSL and 330' FEL of Section 22 Sec. 22, T-24-S, R-36-E 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR PARISH | 13. STATE 3352 DF N.M. 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 PLANS (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) 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.)* The following procedures are recommended for the plugging of this well. Set Cast Iron Bridge Plug at 3100' with 35' cement cap. 2). Set Cast Iron Bridge Plug at 1500' with 35' cement cap.

3). 50' cement plug set at surface

You will be notified when surface is restored to original contour for your inspection. (Surface is not federally owned)

OCT 28 1983

PO DIST. 6 N. M.

18. I hereby certify that the foregoing is true and correct				NEW MET
SIGNED	TITLE	President	DATE	10-27-83
(This space for Federal or APPROVED (Orig. Sgd.) PETER W. CHESTER CONDITIONS OF APPROVAL, IF ANY:	TITLE		DATE	

DEC 15 1983