

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

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.)

5. LEASE DESIGNATION AND SERIAL NO.

NM-28052

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Donna Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Jalmat

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 22, T-24-S, R-36-E

12. COUNTY OR PARISH

Lea

13. STATE
N.M.

1.

OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Lewis B. Burleson, Inc.

3. ADDRESS OF OPERATOR

P.O. Box 2479 Midland, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

990' FSL and 330' FEL of Section 22

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3352 DF

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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 perti-
nent to this work.)*

Pull out of hole with 105 jts. tubing set Cast iron bridge plug at 3100' with 35'
cement cap and cast iron bridge plug at 1500' with 35' cement cap. Set
50' cement plug at surface. Install marker. Clean and level location

RECEIVED
Nov 30 10 02 AM '83
BUR. OF LAND MGMT
ROSSELL DISTRICT

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

SIGNED

TITLE

Superintendent

DATE

11-18-83

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

8-13-85

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 14 1985

O.C.D.
HOBBS OFFICE