

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TR. DATE*
(Other instructions on re-verse side)

Form approved.
Budget Bureau No. 42-R1424.

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 - Fed.

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Jalmat

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

S-22, T-24, R-36

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 33 FEL of Section 22, T-24, R-36

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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.)*

Change of operator from John Yuronka to Lewis B. Burleson, Inc.

We are going to re-work present producing intervals to obtain new production.

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

SIGNED Jerry H. H. H.

TITLE Production Clerk

DATE 4-22-83

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: