

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS

(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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		3. LEASE DESIGNATION AND SERIAL NO. NM-7951	
2. NAME OF OPERATOR Frisco Energy, L.L.C.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 2431 E. 51st Street, Suite 300, Tulsa, OK 74105		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit J 1980'FSL & 1980'FEL NW SE/4		8. FARM OR LEASE NAME Tenneco Federal	
14. PERMIT NO. 3002529205		9. WELL NO. 3	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3004.4' GR 3019' KB		10. FIELD AND POOL, OR WILDCAT Dublin Devonian	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12-T26S-R37E	
		12. COUNTY OR PARISH Lea	
		13. STATE NM	

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 COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

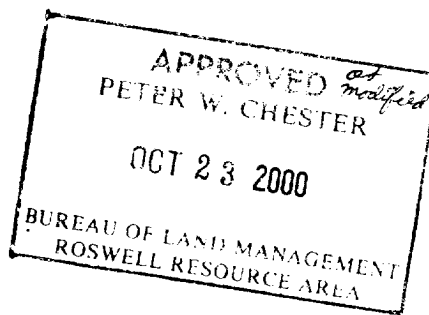
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)

The purpose of this work is to Plug & Abandon the current producing interval, Devonian at 9124-9248 overall and re-complete in the Lower Clear Fork, 6905-22' and 6874-90'. This work will commence as soon as approval is received. *Tubb*

See attached recompletion prognosis.

Note all Depths are TVD.



RECEIVED
2000 OCT 16 P 12:33
BUREAU OF LAND MGMT.
ROS WELL RESOURCE AREA

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

SIGNED Charles E. Smith TITLE Charles E. Smith/Co-Manager DATE 10/10/00

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE NOV 6 2000

CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side



**RECOMPLETION PROGNOSIS
TENNECO FEDERAL 3
SEC. 12-26S-37E
LEA CO, NEW MEXICO**

1. Move in and rig up well service unit
2. Install BOP
3. Trip out of hole with tubing and Lok-Set packer. Hydrotest tubing out of hole. Lay down approximately 2200'. Tally tubing.
4. Run gauge ring and junk basket to 9000'. Set CIBP @ 8999'. Spot ^{33'}10' of cement on plug with dump bailer.
5. Fill casing to 8000' with KCL water
6. Perf Lower Clearfork 6905-22', 6874-90" with 3 1/8" gun 2 SPF
7. Trip in hole with LOK-SET Packer 1.78" seating nipple. Set packer @ 6840'
8. Remove BOP and flange up wellhead
9. Test well
10. Acidize with 1500 gals 15% HCL acid with additives and ball sealers
11. Test well
12. Stimulate further if necessary
13. Clean up well and return to production. Release well service unit and rentals

