| | L FED STATES OF MENT OF THE INTER | IOR (Other instruction, on r | Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO. |
|--|---|--|--|
| SUNDRY NOT | U OF LAND MANAGEMEN ICES AND REPORTS Tales to drill of to deepen or plug ATION FOR PERMIT—" for such p | ON WELLS | CC-062749 (B) 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| OIL X CAS OTHER | | | 7. UNIT AUGERMENT NAME |
| 2. NAME OF OPERATOR | | | S. FARM OR LEASE NAME |
| Highland Production Company 3. ADDRESS OF OPERATOR | | | Conoco "A" Federal |
| 810 N. Dixie Blvd. 1. LOCATION OF WELL (Report location of See also space 17 below.) At surface 2310' FNL and 2310' | | Texas 79761 State requirements.* | 10. FIELD AND POOL, OR WILDCAT Weldcat East Mason (Bone Spring 11. SEC., T., B., M., OR BLE. AND SURVEY OR AREA SURVEY OR AREA |
| 14. PERMIT NO. | 1.17 | | Section 19, T-26-S, R-32-E, NMPM |
| \ | 15. ELEVATIONS (Show whether DE. | , RT, GR, etc.) | 12. COUNTY OR PARISH 13. STATE |
| 18. Chark Any | 1 3172.1 GR | | Lea New Mexico |
| NOTICE OF INTENT | | ature of Notice, Report, or (| |
| TEST WATER SHOT-OFF POF FRACTURE TREAT ME SHOOT OR ACIDIZE REPAIR WELL CHOOSE COMMENT OF SPUID & COMMENT OF SHOOT OF SHO | CLL OR ALTER CASING ULTIPLE COMPLETE SANDON* HANGE PLANS Information X | WATER SHOT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (Note: Report results Completion or Recompletion | BEPAIRING WELL ALTERING CASING ABANDONMENT* of multiple completion on Well etion Emport and Log form) including assimated date of starting any id depths for all markers and zones perti- |
| Hallı | urface Casing 8 5/8" burton Light Cement- | to 1195'. Cement we Prem and Premian Plu S/2" csq 5etti | s Cement - |
| | TA | Am Ks | RECEIVED |
| SIONED Johnnye L. Nance (This space for Federal or State office t | May TITLE ASS | istant Secretary | DATE May 24, 1989 |
| APPROVED BY | TITLE | ACCIN | DATE |
| CONDITIONS OF APPROVAL, IF ANY | : | .: | |