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Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR   JUL 18 8 50 AM '88
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 Form 9-331-C for such proposals.)

1. oil well [X]   gas well [ ]   other

2. NAME OF OPERATOR
Highland Production Company

3. ADDRESS OF OPERATOR
810 North Dixie, Suite 202, Odessa, TX 79761

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 330' FEL & 2310' FNL
AT TOP PROD. INTERVAL: 330' FEL & 2310' FNL
AT TOTAL DEPTH: 330' FEL & 2310' FNL

5. LEASE
LC-062749 (B)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Conoco "A" Federal

9. WELL NO.
2

10. FIELD OR WILDCAT NAME
North Mason (Delaware)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 19, T-26-S,
R-32-E, NMPM

12. COUNTY OR PARISH   13. STATE
Lea   New Mexico

14. API NO.
30-025-30389

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3169.2 GR

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	[ ]	[ ]
FRACTURE TREAT	[ ]	[ ]
SHOOT OR ACIDIZE	[ ]	[ ]
REPAIR WELL	[ ]	[ ]
PULL OR ALTER CASING	[ ]	[ ]
MULTIPLE COMPLETE	[ ]	[ ]
CHANGE ZONES	[ ]	[ ]
ABANDON*	[ ]	[ ]
(other) Simple completion information		

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

6/24/88   Spud 6:30 P.M.

6/25/88   Set 1218.52' of 8 5/8" 24# J-55 ST&C casing. Cemented with 400
           sacs Haliburton Light with 250 sacs Class C neat 50/50 POS.
           Circulated to surface.

7/01/88   Set 4305.96' 5 1/2" 15.5 # LT&C API LTD casing with 650· sacs light,
           15# salt, 1/4 # flocele and 300 sacs 50/50 POS. Circulated

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED _____ TITLE Assistant Corporate DATE ___ July 15, 1988 ___
        Johnny L. Nance   Secretary

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

AUG 3 1988

SJS
CARLSBAD, NEW MEXICO

*See Instructions on Reverse Side