

Form 3160-5
(November 1983)
(Formerly 933)

U.S. OIL CONS. COMMISSION
UNITED STATES
P.O. BOX 88240
DEPARTMENT OF THE INTERIOR
HOBBBS, NEW MEXICO
BUREAU OF LAND MANAGEMENT

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

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. LC 064118
2. NAME OF OPERATOR Plains Petroleum Operating Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME LC-064118
3. ADDRESS OF OPERATOR 415 West Wall, Suite 1000, Midland, TX 79701	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, 2110' FSL & 1980' FEL Unit J	8. FARM OR LEASE NAME E. C. Hill Federal B
14. PERMIT NO.	9. WELL NO. #7
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 3268' GR	10. FIELD AND POOL, OR WILDCAT Teague (Blindbry) 3/1/87 Paddock R-10776
	11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec 34, T23S, R37E
	12. COUNTY OR PARISH Lea
	13. STATE NM

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"/>	PCLL 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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) Put on Pump	
(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.) *

MIRUSU. ND wellhead. NU BOP. Release pkr., equalize tbq/csg. POOH w/tbg & LD pkr. PU & RIH w/2-3/8" BPM. 2-3/8" perf'd tbq sub, 2-3/8" SN, 20 jts 3/8" tbq, 2-3/8" x 5-1/2" TAC, 167 jts 2-3/8" tbq. Tag up @ 5886' KB (70' fill, 192' rathole). Set TAC @ 5231' KB w/10000# tension. EOT @ 5868', SN @ 5834', ND BOP. NU wellhead. SI well. SDFN. Prep to run pump & rods @ rpt time.

PU 20-150 RWBC 16 - 4' pump & RIH, PU rods, hang on, space out, RU X-L, load & test tbq & PA to 500#. Both good, RD X-L & RDSU, leave unit pumping on hand to test bty.

RECEIVED
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CART
AIR

18. I hereby certify that the foregoing is true and correct		Petroleum Engineer		February 9, 1993	
SIGNED	<i>David R. Glass</i>	TITLE		DATE	
(This space for Federal or State office use)					
APPROVED BY	DAVID R. GLASS	TITLE		DATE	2-17-93
CONDITIONS OF APPROVAL					
NEW MEXICO					

*See Instructions on Reverse Side