

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other instructions
verse side)

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	
3. ADDRESS OF OPERATOR 415 W. Wall, Suite 1000, Midland, Texas 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		8. FARM OR LEASE NAME E. C. Hill 'B' Federal	
14. PERMIT NO.		9. WELL NO. 7	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3268' GR		10. FIELD AND POOL, OR WILDCAT Teague Blinebry	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 34, T23S, R37E	
		12. COUNTY OR PARISH Lea	
		13. STATE NM	

18. 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"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANE	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input checked="" type="checkbox"/> Set 878 + 5 1/2' DST		<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.) *

6-25-92 Stake and build location. Set 14" 45#/ft conductor pipe in 18" hole. Cemented w/10 sx.

6-26-92 McKee Drlg spud well at 5:15 p.m. w/12-1/4" hole. Test BOP's to 1500 psi.

6-28-92 Set 27 joints of 8-5/8" ET&C J-55 24#/ft surface casing at 1216'. Cement casing w/535 sx Class 'C' cement. Circulate 90 sx cement to pit. WOC 12 hrs.

7-3-92 DST #1 4920' - 5040'

7-5-92 DST #2 5344' - 5520'

7-6-92 DST #3 5550' - 5752'

7-7-92 TD @ 6001'. Run logs DDL-MSFL, SDL-CNS-SGR. Set 134 joints 5-1/2" 15.5# J-55 LTC 8RD casing in 7-7/8" hole at 6000'. DV tool at 4910'. Cement in 2 stages: 1st stage 350 sx Class 'C'; 2nd stage 1295 sx Class 'C' cement. Circulate 285 sx cement to pit. WOC 72 hrs.

ACCEPTED FOR RECORD

CARLSBAD, NEW MEXICO

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

SIGNED

Thom A. Hetherington

TITLE

Petroleum Engineer

DATE

7-30-92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED 10-10-10

10-10-10

10-10-10

10-10-10

10-10-10

10-10-10