

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
P. O. BOX 1980
HOBBS, NEW MEXICO

SUBMIT IN TRIPI

(Other instructions)

FE*

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985
RELEASE DESIGNATION AND SERIAL NO.

LC - 064118

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"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Plains Petroleum Operating Company		8. FARM OR LEASE NAME E.C. Hill "B" Federal	
3. ADDRESS OF OPERATOR 415 W. Wall, Suite 1000 Midland, Texas 79701		9. WELL NO. 8	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface UNIT 0, 800' FSL & 1980' FEL		10. FIELD AND POOL, OR WILDCAT Teague (Blinebry)	
14. PERMIT NO. 3D-025-3173D		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34 - T23S - R37E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3253.2' GL		12. COUNTY OR PARISH Lea	
		13. STATE N. Mex	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

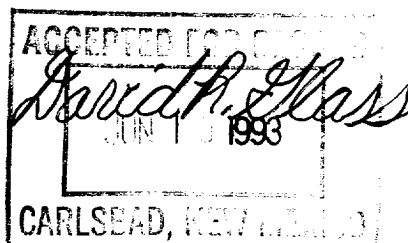
TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<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 type="checkbox"/>	Install Pumping Equip.	<input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion or 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.)

Release Pkr. NU BOP. TOOH w/ tubing. Pick up notched collar and Bull dog bailer on end of 2-3/8" tbg. Tag sand at 5740'. Clean out to 5760'. Run in hole with 2-7/8" production tubing. Hang rods and pump (2x1-1/2"x16") on pumping unit and produce to battery. CONVERT FROM FLOWING WELL TO PUMPING WELL.



RECEIVED
MAY 7 11 37 AM '93
CARLSBAD AREA
OFFICE

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

SIGNED Mark A. Thibodeau

TITLE Petroleum Engineer

DATE 5-4-93

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side

RECEIVED

JUN 17 1993

GOV HUBBS
OFFICE