

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SEE INSTRUCTIONS
ON REVERSE SIDE

EXPIRES
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. WELL NO. <input checked="" type="checkbox"/> WILL <input type="checkbox"/> CANCEL	5. LEASE DESIGNATION AND SERIAL NO. LC-032579(e)
2. NAME OF OPERATOR National Coop. Refinery Assoc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME -
3. ADDRESS OF OPERATOR 415 W. Wall, Suite 2215, 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 330' FNL, 330' FWL of Section 1	8. FARM OR LEASE NAME Westates Federal
14. PERMIT NO. -	9. WELL NO. 6
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3146' KB	10. FIELD AND POOL, OR WILDCAT N. Justis, McKee & Ellenburger
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 1, T-25-S, R-37-E
	12. COUNTY OR PARISH Lea
	13. STATE New Mexico

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

NOTICE OF INTENTION TO:

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 PLANT <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

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"/> TA Status	<input checked="" 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 the work.)

Well is TA pending the completion of a waterflood feasibility study now being conducted by Texaco, Inc.

APPROVED FOR 12 MONTH PERIOD
ENDING 6/29/88

ACCEPTED FOR RECORD

JUN 29 1987

SJS
CARLSBAD, NEW MEXICO

JUN 26 11 09 AM '87
CARLSBAD RESOURCE
AREA HEADQUARTERS

RECEIVED

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

SIGNED Carrie A. Baze TITLE Production Clerk DATE 6-24-87
(This space for Federal or State office use)

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

*See Instructions on Reverse Side

RECEIVED

JUL 2 1987

OCD
HOBBS OFFICE