

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985
5. LEASE DESIGNATION AND SERIAL NO
LC-067968
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☐ GAS WELL ☐ OTHER Water Injection
2. NAME OF OPERATOR
Sirgo Operating, Inc.
3. ADDRESS OF OPERATOR
P.O. Box 3531, Midland, Texas 79702
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

7. UNIT AGREEMENT NAME
West Dollarhide Queen Sand Unit

8. FARM OR LEASE NAME

9. WELL NO.
19

10. FIELD AND POOL, OR WILDCAT
Dollarhide Queen

11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA
Sec. 30, T24S, R38E

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

12. COUNTY OR PARISH Lea 13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

2-6-90 MI&RU plugging unit. RIH & set 7" CR @ 1130'. Squeeze w/350 sx. Class "C", spot 5 sx on top of CR. Circ 10.2 brine gel to 335'. Perf @ 335'. Pumped 160 sx. Pump LCM from 350'. Pump 310 sx Class "C" & got circ to surface. RD. Cut off wellhead & install P&A marker.

RECEIVED

FEB 12 6 33 AM '90

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

SIGNED

Bonnie Atwater

TITLE

Production Technician

DATE

2-9-90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side