

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N. OIL CONS. COMMISSION  
P.O. BOX 1980  
HOBBS, NEW MEXICO 88240

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: September 30, 1990

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Temporarily shut in	5. Lease Designation and Serial No. LC054667
2. Name of Operator Lanexco, Inc.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 1206 Jal, NM 88252 505-395-3056	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SWNW S33-T25S-37E 330124 16801N	8. Well Name and No. El Paso Tom Federal #2
	9. API Well No. 300252672500
	10. Field and Pool, or Exploratory Area Langlie Mattex SRQ
	11. County or Parish, State Lea County, NM

**12. CHECK APPROPRIATE BOX(es) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection

13. 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.)

Pressure test casing to 500# for 30 minutes  
and monitor with pressure recorder.  
Will Call the BLM to witness test.

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

Signed Mike Coguland Title Production Superintendent Date 6-27-95  
(This space for Federal or State office use)  
Approved by (ORIG. SGD.) JOE G. LARA Title PETROLEUM ENGINEER Date 7/27/95  
Conditions of approval, if any: See attached

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

NOT POSTED  
myo

**RECEIVED**

AUG 01 1995

WCD HOBBS  
OFFICE