13:15 FROM E -0	P.O. 8	OILICONSI COMMISSION IOX 1980 S, NEW MEXICO 88240
DEPARTMENT O BUREAU OF LAN SUNDRY NOTICES AN	F THE INTERIOR D MANAGEMENT D REPORTS ON WELLS to deepen or reentry to a different reservoir.	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No LC-034117-B 6. If Indian, Alloree or Tribe Name
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
Other		8. Well Name and No Nancy Fed. Com. #1
2 Name of Operator Lewis B. Burleson, Inc. 3 Address and Telephone No. (015)683-4747		9. API Well No. 30-025-29529 10. Field and Pool, or Exploratory Area
, Sec., T., R., M., or Survey Descrip L 2310 FWL , Sect. 28, T25S	, R37E	Jalmat 11. County or Parish. State Lea, NM
	O INDICATE NATURE OF NOTICE, REFO	
		Change of Plans
	Recompletion Plugging Back Casing Repair	New Construction Non-Routine Fracturing Water Shut-Off
	Altering Casing Other	Conversion to Injection Dispose Water (Note: Report routs of multiple completion on Well Completion or Recompletion Report and Log form.)
Tours and measured and the follow of	Approved as to plugg up or the well bore. Liabury under bond is retained until surface restoration is completed.	RECEIVED AREA 100 59 MM '94
tofegoing is true of currect	Tide Vice-President	Date 9/28/94
	UNITED DEPARTMENT G BUREAU OF LAN SUNDRY NOTICES ANI m for proposals to drill or ise "APPLICATION FOR PE SUBMIT IN Other urleson, Inc. 479 Midland, Sect. 1, R., M. or Survey Descrip L 2310 FWL , Sect. 28, T255 APPROPRIATE BOX(s) T SUBMISSION Intent int Report and ourment Notice inpleted Operations (Clearly state all perturns and measured and true vertical de t t a c h e d "	P.O. E HOBB DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDER VOTICES AND REPORTS ON WELLS IN for proposals to diff or to deepen or reentry to a different reservoir. e "APPLICATION FOR PERMIT" for such proposals SUBMIT IN TRIPLICATE Onter urleson, Inc. 2. 479 Midland, TX 79702 (915)683-4747 Sec. T. R. M. or Surge Description L 2310 FWL , Sect. 28, T25S, R37E APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPOR SUBMISSION TYPE OF ACTION Phyging Back Casis Repair andownent Notice Other with all give periment dates, including estimated date of start uons and measured and the vertical depth for all markers and zenes periment to this work.pt ttached "

*See instruction on Reverse Side

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