

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-28335
2. NAME OF OPERATOR Sun Exploration & Production Co.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 1861, Midland, Texas 79702	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 Unit Letter C, 660' FNL & 1980' FWL API 30-025-29665	8. FARM OR LEASE NAME Pitchfork Federal
14. PERMIT NO. To drill dated 3/27/86	9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3361' GR	10. FIELD AND POOL, OR WILDCAT Pitchfork Ranch (Morrow)
	11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA Sec. 11, T-25-S, R-34-E
	12. COUNTY OR PARISH Lea
	13. STATE NM

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 COMPLETION <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"/>	

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) P&A'd dry hole	X

(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.)\*

9/6/86 Set 4½" Gearhart CIBP @ 15280', Displ w/12.5# oil mud w/10# brine. Spot 16 sks "H" cmt 15280'-15190'.

9/9/86 Tagged cmt plug @ 15200'. Test csg & plug to 4000# for 30 min, O.K.

3/37/87 Set 7" EZSV ret. @ 12737'. Displ csg w/500 bbls 10# mud. Sqzd Atoka Perfs 14186'-14194' w/250 sks "H" cmt, tailed in w/50 sks "H" neat. Displ 264 sks below ret. Spot 36 sks on ret. TOC plug at 12537' (132 sks in perfs, 78 sks in liner, 54 sks in 7" below ret, 36 sks on top of ret.)

3/30/87 Rotary WL cut 7" csg at 5345' w/7" jet cutter. LD 132 jts, 5270' 7", 26# LTC csg.

3/31/87 Displ hole w/10.3 ppg mud laden fluid, spot 125 sks 'H' cmt 5425'-5100'. Tagged TOC @ 5100'.

4/1/87 Spot 25 sks 'H' 60'-surf.

4/2/87 Clean out cellar, cut off wellhead, weld on steel plate & marker.

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

SIGNED Martin L. Perez

TITLE Associate Accountant

DATE 5/12/87

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

MAY 14 1987

\*See Instructions on Reverse Side

RECEIVED  
MAY 18 1997  
OCC  
HOBBS OFFICE