

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires March 31, 1993

CCC-Hobbs

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

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

AMERICAN INLAND RESOURCES COMPANY, LLC.

3. Address and Telephone No.

P.O. BOX 50938; MIDLAND, TX 79710; (915)685-0981

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FSL & 660' FEL; SEC 35, T-24-S, R-36-E, UNIT 1

5. Lease Designation and Serial No.

NMNM0241

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

CITIES SERVICE FEDERAL #2

9. API Well No.

30-025-09692

10. Field and Pool, or Exploratory Area

JALMAT (TNSL-YTS-7RVRS) (PRO GAS)

11. County or Parish, State

LEA CO., NM

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

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other REQUEST TA STATUS  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

ELECTRIC LOG INDICATES POSSIBLE GAS ZONE NOT PREVIOUSLY COMPLETED.

WE REQUEST A ONE YEAR TA STATUS TO EVALUATE THIS POTENTIAL TO COMPLETE

THIS ZONE.

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

Signed Michael D. Puchard Title OPERATIONS ENGINEER Date 09/19/02  
(This space for Federal or State use)

Approved by (ORIG. SGD.) JOE G. LAPA Title Superintendent  
Conditions of approval, if any:

Date 11/12/02

GW