

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

5. LEASE DESIGNATION AND SERIAL NO.
LC-064118

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

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

G. H. Mattix 'B'

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT
Teague Blinbry

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 3, T24S, R37E

12. COUNTY OR PARISH 13. STATE

4. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3276 DF

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other)

(Other)

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

7. 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.)

09-08-94

RU XL, load tubing to 500 psi. Pump 500 gal 15% NEFE down casing. Flush w/150 BFW. SI 2 hours and pump back. Pump 13 BFW w/ 110 gal scale inhibitor and flush w/300 BFW. SI 24 hours and pump back.

ACCEPTED FOR RECORD

J. Lara
21 1994

RLSBAD, NEW ME

I hereby certify that the foregoing is true and correct

SIGNED

Area Engineer

September 20, 1994

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side