

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
N. M. OIL & GAS DIVISION  
P.O. BOX 1980  
HOBBS, NEW MEXICO 88240

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

3. LEASE DESIGNATION AND SERIAL NO.

NM-12852

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "27" A

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT  
North Bluitt  
(Siluro Devonian)

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

Sec 27, T-7S, R-37E

12. COUNTY OR PARISH

13. STATE

Roosevelt

NM

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR

H. L. Brown

3. ADDRESS OF OPERATOR

Post Office Box 2237, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface

Unit C, 660' FNL & 1980' FWL of Sec 27, T-7S, R-37E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4058.4 GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other) Movement of Salt Water

(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.)\*

H. L. Brown operates the above well which produces approximately 9 bbls of salt water per day. We would appreciate your granting us permission to remove this produced salt water from the salt water storage tank at the well site by truck to a designated Salt Water Disposal Facility.



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

SIGNED

*James Small*

TITLE

Production Clerk

DATE

9-22-88

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED  
DATE  
PETER W. CHESTER  
OCT 18 1988  
BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

\*See Instructions on Reverse Side