

UNITED STATES N. M. OIL CONS. COMM.
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NM 88241

Budget Item No. 1004-1
Expires August 31, 1985
5. LEASE DESIGNATION AND SERIAL

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐
NAME OF OPERATOR

30-005-00969

Circle Ridge Production Inc.
ADDRESS OF OPERATOR

P.O. Box 755 Hobbs, NM 88240

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

1980' FSL & 1980' FWL of Sec. 3

14. PERMIT NO.

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

LC-068474

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME Drickey
Queen Sand Unit Tr. 6

9. WELL NO.

15

10. FIELD AND POOL OR WILDCAT

Caprock Queen

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

Sec. 3, T14S, R31E

12. COUNTY OR PARISH 13. STATE

Chaves

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Temporarily Abandoned

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

Request that subject well be placed in a temporarily abandoned status effective 2/1/90. Last production March 1984.

RECEIVED
MAR 12 8 49 AM '90
BUREAU OF LAND MGMT
ROSWELL RESOURCE AREA

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

SIGNED Peter W. Chester

TITLE Agent

DATE 3/6/90

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED FOR 12 MONTH PERIOD
ENDING MAR 22 1991

*See Instructions on Reverse Side

APPROVED
DATE PETER W. CHESTER

MAR 22 1990

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

RECEIVED
MAR 23 1990
OCD
HOBBS OFFICE