

Form 3160-5
(July 1989)
(Formerly 9-331)

P. O. BOX 1980
HOBBS, NM 882

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR
OF COPIES TO
(Other instructions on re-
verse side)

NM Roswell District
Modified Form No.
NMXO-3160-4

5. LEASE DESIGNATION AND SERIAL NO.

NM-080123

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME West Cap
Queen Sand Unit Tract 9

8. FARM OR LEASE NAME

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT
Caprock Queen

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

Sec. 21, T14S, R31E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

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 each proposal.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Injection

2. NAME OF OPERATOR
Circle Ridge Production, Inc.

3a. Area Code & Phone No.
505-393-2727

3. ADDRESS OF OPERATOR
c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241

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

330' FNL & 2310' FEL of Sec. 21

unit B

14. PERMIT NO.

15. ELEVATIONS (Show whether SP, RT, OR, etc.)

4251

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 PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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 perti-
nent to this work.)*

Work began 7/5/91. Dug out around well head. Found leak in weld
on 5 1/2" bell nipple. Rewelded same. Returned to injection 7/6/91,
injection pressure 1400#.



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

SIGNED

Blanca J. Jolley

TITLE

Agent

DATE

7/8/91

(This space for Federal or State office use)

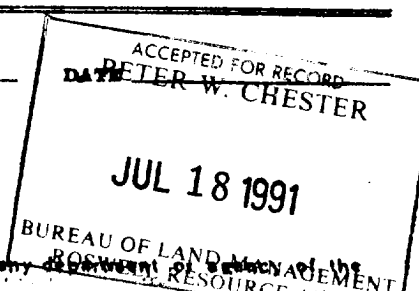
APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or reports.



RECEIVED

JUL 24 1991

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HOBBS OFFICE