

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM
87505

Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.
30-025-26370

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
SALADO BSW

7. Lease Name or Unit Agreement Name
STATE 4 #1

8. Well Number
1

9. OGRID Number
370661

10. Pool name or Wildcat
BSW

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3997 GR

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" (FORM C-101) FOR SUCH
PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other **BSW**

2. Name of Operator
Llano Disposal, LLC

3. Address of Operator
P.O. Box 250, Lovington NM 88260

4. Well Location
Unit Letter **E** : **1980** feet from the **N** line and **660** feet from the **W** line
Section **4** Township **13S** Range **36E** NMPM County **Lea**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3997 GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: **Casing/Cavity Test**

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

**Llano Disposal, LLC would like to
Schedule a casing/cavity pressure test
for this well on Thursday, Jan 10,
2019 at 10:00 A.M.**

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE **Marvin Burrows** TITLE **Agent for** DATE **1/4/19**
Type or print name **MARVIN BURROWS** E-mail address: **BURROWS MARVIN** PHONE: **575-631-8067**
For State Use Only **@6mail.com**

APPROVED BY: **[Signature]** TITLE **Petroleum Engineer** DATE **01/09/19**
Conditions of Approval (if any):

American Valve & Meter, Inc.

1113 W. BROADWAY

P.O. BOX 166 HOBBS, NM 88240

T0:Rental

DATE: 01/08/2019

This is to certify

I, ~~Stephen~~ Waskas, Technician for American Valve & Meter Inc. has checked the calibration of the following instrument.

8" Pressure recorder

Ser# 3399

at these points:

Pressure #1000			Temperature *or Pressure #		
Test	Found	Left	Test	Found	Left
- 0	-	- 0	-	-	-
- 500	-	- 500	-	-	-
- 700	-	- 700	-	-	-
- 1000	-	- 1000	-	-	-
- 200	-	- 200	-	-	-
- 0	-	- 0			

Remarks: _____

Signature: 