

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate*
(Other instruct
verse side)

Budget Bureau No. 1004-0136
Expires August 31, 1985

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.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Water Injection

2. NAME OF OPERATOR S & J Operating Company

3. ADDRESS OF OPERATOR P. O. Box 2249, Wichita Falls, TX 76307

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface 330' FNL & 990' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3556' DF

5. LEASE DESIGNATION AND SERIAL NO.
LC-050158

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
South Red Lake Grayburg

8. FARM OR LEASE NAME

9. WELL NO.
3

10. FIELD AND POOL, OR WILDCAT
Red Lake ON-GB-SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 35, T17S, R27E

12. COUNTY OR PARISH
Eddy

13. STATE
N. M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	(Other)	<input checked="" type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		
CHANGE PLANS	<input type="checkbox"/>		

(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.)*

This well was T. A.'d when we took over operations on 10/1/87. We do not know how long it had been shut-in prior to this date. A consulting engineering firm is currently studying this waterflood unit to determine any changes that may be needed in the flood pattern.

APPROVED FOR 12 MONTH PERIOD

ENDING 02-22-90

RECEIVED
FEB 27 8 52 AM '89
CARTER
AREA

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

SIGNED Sandy Robertson TITLE Petroleum Engineer DATE 2/22/89

(This space for Federal or State office use)

APPROVED BY John M. Hines TITLE Director of Resources DATE 3-20-89

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side