(June 1990) DEPARTMEN BUREAU OF SUNDRY NOTICES Do not use this form for proposals to dr		
SUBMIT	IN TRIPLICATE	7. If Unit or CA, Agreement Designation
Type of Well Oil Oil Well Well Well Well Other WIW A		8. Well Name and No. Brooks # 12
J D R Itd.		9. API Well No.
3. Address and Telephone No.		30-015-01428
811 Bullock Ave. Artesia, NM 4. Location of Well (Footage, Sec., T., R., M., or Survey D		10. Field and Pool, or Exploratory Area Empire Y-SR
• • • • • • • • • •	• /	11. County or Parish, State
1650 N. & 2310 M 19-17 2971 E	20 Unit F	Eddy
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, RE	PORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACT	
Notice of Intent		Change of Plans
		New Construction
Subsequent Report		Non-Routine Fracturing Water Shut-Off
Final Abandonment Notice	Casing Repair Altering Casing Other Repair & Retest	Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

11-2-95 Found hole in top joint of tubing. Replaced joint and circulated packer fluid. Set packer @ 557' and tested casing with state witnessing test. Return to injection. Work was done 11-2-95

Approved by	Tide	Date
This space for Federal or State office u	se)	
igned Auto	Title Agent	Date
hereby certify that the foregoing is fru		
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	3 - 25 - 1	OIL CON DIV.
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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 representations as to any matter within its jurisdiction.