

RECEIVED

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☐ Oil Well ☐ Gas Well ☒ Other Injection Well

2. Name of Operator
Premier Oil & Gas, Inc.

3. Address and Telephone No.
P.O. Box 1246, Artesia, NM 88210

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SW/4 SW/4 Section 15 T-17S R-30E
Unit M 330' FSL, 330' FWL

5. Lease Designation and Serial No.

NM-0384575

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

DH Parke "B" Tr B #1

9. API Well No.

30-015-04157

10. Field and Pool, or Exploratory Area

grayburg-Jackson (SR, Q, GB, SA)

11. County or Parish, State

Eddy County, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☒ Altering Casing
☒ Other Casing Integrity Test

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ 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.)*

The casing integrity test was performed at well on May 24, 1993, and was done according to your instructions in certified document dated April 8, 1993. Representative for BLM was notified 24 hours prior to testing. Casing was tested to 500 psig for (3) hours; tested satisfactorily.

L. Lora
17 1993

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

Signed Paul A. Rute Title Consulting engineer Date May 26, 1993

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: