

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on re-  
verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

RECEIVED

NM-467933

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NOV 28 '89

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

2. NAME OF OPERATOR Larry Jones dba  
Premier Production Co. & David E. Barrett

3. ADDRESS OF OPERATOR  
P.O. Box 1246, Artesia, NM 88210

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

Unit B: 660 FNL & 1980' FEL; Sec 15

14. PERMIT NO.

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

3455' GR

7. UNIT AGREEMENT NAME C. C. D.

ARTESIA, OFFICE

8. FARM OR LEASE NAME  
Dale H. Parke "B" Tr.C

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT  
Grayburg-Jackson  
(SR, O, G, SA)

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

Sec 15 T-17-S R-30-E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

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 COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Change of Operator

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

Previous Owner & Operator: Southland Royalty Co.

Effective Date of Change: 7/1/89

State Wide Federal Lease Bond #A-R-71409-36

w/American Employers Insurance Co.

RECEIVED

NOV 7 10 43 AM '89

CAD. ARTESIA

ACCEPTED FOR RECORD

AUG 29 1989

CARLSBAD, NEW MEXICO

NOV 20 11 17 AM '89

RECEIVED

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

SIGNED Larry Jones

TITLE operator

DATE 8-15-89

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side