

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUM
OF COPIES REQ.
(Other instructions on re-
verse side)

MH Rowell District
Modified Form No.
NMXO-3160-4

clsf

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		3a. Area Code & Phone No. 505-677-2360		5. LEASE DESIGNATION AND SERIAL NO. LC-029426-B	
2. NAME OF OPERATOR SOCORRO PETROLEUM COMPANY ✓				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. BOX 38, LOCO HILLS, NM 88255		RECEIVED DEC 23 1991 O. C. U. ARTESIA OFFICE		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2130' FSL & 1980' FEL				8. FARM OR LEASE NAME H.E. WEST "B"	
				9. WELL NO. 48	
				10. FIELD AND POOL, OR WILDCAT Grayburg Jackson	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA Sec. 10-T17S-R31E	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3902' GR		12. COUNTY OR PARISH Eddy	
				13. STATE NM	

16.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETION ☐
ABANDON* ☐
CHANGE PLANE ☐

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(Other) Reinstatement of APD

(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.)

Please reinstate the Application for Permit to Drill the above well.
This APD was cancelled by letter dated November 22, 1991. Socorro did not drill the well during the allotted time for economic reasons. Socorro plans to drill this well within the next year.

Post ID-1
1-24-92
Re-instate Intent

18. I hereby certify that the foregoing is true and correct		
SIGNED <u>John Gould</u>	TITLE <u>Manager</u>	DATE <u>12/09/91</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE <u>12 21 91</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side