

C/SF

Form 3160-5  
(June 1990)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**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

2. Name of Operator  
**SOCORRO PETROLEUM COMPANY**

3. Address and Telephone No.  
**P.O. BOX 37 LOCO HILLS 88255 (505)677-3223**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**1880' FWL & 1980' FSL, Unit K, Sec 5-T17S-R31E**

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

5. Lease Designation and Serial No.  
**LC-029435-B**

6. If Indian, Allottee or Tribe Name  
**NA**

7. If Unit or CA, Agreement Designation  
**NA**

8. Well Name and No.  
**J.L. KEEL "B" #47**

9. API Well No.  
**30-015-26789**

10. Field and Pool, or Exploratory Area  
**Grayburg-Jackson**

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 **Extend Application to**  
**drill date**
- ☐ 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.)\*

Request for application to drill date be extended for another year.

RECEIVED  
FEB 11 1994  
ARTESIA

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

Signed

Title **Production Manager**

Date **2-1-94**

(This space for Federal or State office use)

Approved by

**(CHIEF, SGD.) JOE G. LARA**

Title

**ENGINEER**

Date

**3/14/94**

Conditions of approval, if any: