NM OIL CONS COMMISSION Drawer DD Artesia, NM 88210 clsr

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
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.    Submit in triplicate
Type of Well   Gas   Other
Type of Well   Gas   Other   SCOORRO PETROLEUM COMPANY   SAPI Well No
Subsequent Report   Gas   Water Shut-Off   Casing Repair   Subsequent Report   Gas   Subsequent Report   Gas   Casing Repair   Completion or Recompletion on Report and Log form.
2. Name of Operator SCOCRRO 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) 2625 FNL & 1335 FEL, Unit G, Sec 10-T17S-R31E  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  TYPE OF ACTION  13. Notice of Intent 14. Abandonment 15. Subsequent Report 16. Plugging Back 17. Casing Repair 18. H.E. WEST "B" #67  9. API Well No. 30-015-27354 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  TYPE OF ACTION  18. Notice of Intent 19. Recompletion 19. Now Construction 19. Now Construction 19. Now Construction 19. Now Construction 19. Now Recompletion Injection 19. Other 19. Extend Application 19. Dispose Water 19. Now Recompletion on Recompletion on Report and Log form) 19. 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.)*
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)  2625' FNL & 1335' FEL, Unit G, Sec 10-T17S-R31E  10. Field and Pool, or Exploratory Area Gray Durg"-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  TYPE OF ACTION  Abandonment  Recompletion  Abandonment  Recompletion  Plugging Back  Casing Repair  Altering Casing  Conversion to Injection  Dispose Water  Note. Report result of multiple completion on Well  Competing of Plans  Non-Routine Fracturing  Conversion to Injection  Dispose Water  Note Report results of multiple completion on Well  Competing of Plans  Non-Routine Fracturing  Conversion to Injection  Dispose Water  Note Report results of multiple completion on Well  Competing or Recompletion Report and Log form 1  Dispose Water  Note Report results of multiple completion on Well  Competing or Recompletion Report and Log form 1  30-015-27354  10. Field and Pool, or Exploratory Area  Gray Durg"-Jackson  11. County or Parish, State  EDDY COUNTY, NM  TYPE OF ACTION  Non-Routine Fracturing  Water Shut-Off  Conversion to Injection  Dispose Water  Note Report results of multiple completion on Well  Competing or Recompletion Report and Log form 1  13 Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent to this work.)*
4 Location of Well (Footage, Sec., T., R., M., or Survey Description)  2625' FNL & 1335' FEL, Unit G, Sec 10-T17S-R31E  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  TYPE OF ACTION  Notice of Intent  Abandonment  Recompletion  Plugging Back Casing Repair  Altering Casing  Other Extend Application  Lipidad Pool, or Exploratory Area  Grayburg-Jackson  11. County or Parish, State  EDDY COUNTY, NM  TYPE OF ACTION  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 or Recomp
4 Location of Well (Footage, Sec., T., R., M., or Survey Description)  2625 ' FNL & 1335 ' FEL, Unit G, Sec 10-T17S-R31E  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  TYPE OF ACTION    Abandonment
EDDY COUNTY, NM  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  Abandonment  Recompletion  Plugging Back  Plugging Back  Casing Repair  Altering Casing  Conversion to Injection  Altering Casing  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.)*
TYPE OF SUBMISSION  TYPE OF ACTION  Abandonment Recompletion Plugging Back Pinal Abandonment Notice  Altering Casing Conversion to Injection Dispose Water (Note. Report results of multiple completion on Well Completion or Recompletion or
TYPE OF SUBMISSION    Abandonment
Notice of Intent    Abandonment
Recompletion    Recompletion   New Construction   Non-Routine Fracturing   Water Shut-Off   Water Shut-Off   Conversion to Injection   Conversion to Injection   Dispose Water   Completion or Recompletion or
Subsequent Report    Casing Repair   Water Shut-Off
Final Abandonment Notice  Casing Repair  Altering Casing  Other Extend Application  Dispose Water  (Note. Report results of multiple completion on Well Completion or Recompletion or Recompletion or Recompletion or Recompletion or Recompletion and Log form.)  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.)*
Other Extend Application  Dispose Water  to Drill Date  (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.)*
to Drill Date  (Note: Report results of multiple completion on Well Completion or Recompletion 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.)*
Completion or Recompletion Report and Log form.)  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.)*
give substitute 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.
in the state of th
APPROVED FOR/2_ MONTH PERIOD
ENDING
4. I hereby certify that the foregoing is true and correct
Signed Title Production Manager Date 3_3_94  This space for Federal or State office use
Approved by 1000 ach ) ME A LADA Title Pet ve Rum Engineer Date 3/24/94
Conditions of approval, if any: