



UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

REPLY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

COPY

FORM APPROVED
OMB No. 1004-0155
Expires November 30, 2000

5. Lease Serial No.
NM-564-26

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
Alcott Fed Com #1

9. API Well No.
30-015-21804

10. Field and Pool, or Exploratory Area
N. Turkey Track (Morrow)

11. County or Parish, State
Eddy Co. NM

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

2. Name of Operator
Southwest Royalties, Inc.

3a. Address
P.O. Box 11390 Midland Tx 79702

3b. Phone No. (include area code)
915-686-9927

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
**1650' FNL & 1980' FEL
Sec 31, T18S, R 29E**

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

**PU I & W pumptruck 2/22/02. Pressure tested csg to 500psig. Recorded test chart (attached).
Request TA status pending evaluation of Neuburg's Bone Spring completion in Neptune 31 #1.**

Accepted for record - NMOCB

COPY

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

C.M. Bloodworth, P.E.

Signature

[Signature]

Area Supervisor

3/25/02

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office