

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form Approved
Budget Bureau No. 1004-0115
Expires August 31, 1985

6. LEASE DESIGNATION AND SERIAL NO.

NM OIL CONS COMMISSION
Draver Indian, allottee or tribe name
Artesia, NM 88210

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 ☐		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Herman J. Ledbetter		8. FARM OR LEASE NAME Southern Federal	
3. ADDRESS OF OPERATOR P.O. Box 5879 Abilene, Texas 79608		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 330 FNL & 330 FEL		10. FIELD AND POOL, OR WILDCAT N. Hackberry Yates, SR	
11. SEC., T., S., W., OR R.R. AND SURVEY OR AREA 30-19S-31E		12. COUNTY OR PARISH Eddy	
13. PERMIT NO.		14. STATE New Mexico	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	☐	PULL OR ALTER Casing	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETION	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANT	☐
(Other) Put back on production	☒		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING Casing	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
(Other)	☐		

(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.)

Put back on production.

ACCEPTED FOR RECORD

(ORIGINAL) DAVID R. GLASS

1993

CARLSBAD, NEW MEXICO

RECEIVED
NOV 23 10:10 AM '93
CAG
AND

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

SIGNED Herman J. Ledbetter

TITLE

DATE 11/22/93

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side