

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

LC-050797

LEASE DESIGNATION AND SERIAL NO.

INDIAN, ALLOTTEE OR TRIBE NAME

LEASE AGREEMENT NAME

FARM OR LEASE NAME

Wills Federal

WELL NO.

19

FIELD AND POOL, OR WILDCAT

Russell-Yates

SEC., T., R., M., OR BLM. AND SURVEY OR AREA

S13-T20S-R28E

COUNTY OR PARISH STATE

Eddy

NM

RECEIVED BY

OCT -8 1986

O. C. D.

2015-07-08

OTHER Injection Well

NAME OF OPERATOR

Timothy D. Collier

ADDRESS OF OPERATOR

P. O. Box 798, Artesia, New Mexico 88201

LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below) AT SURFACE

2333 FNL and 2333 FEL

2320

PERMIT NO.

ELEVATIONS (Show whether DE, RT, GR, etc.)

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

NOTICE OF INTENTION TO

TEST WATER SHUT-OFF

PLUG OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANT

Other: Change in Ownership

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.*

Former operator: Barber Oil, Inc.
P. O. Box 1658
Carlsbad, New Mexico 88220

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

SIGNED Timothy D. Collier

TITLE Operator

DATE 10-01-86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

OCT 03 1986

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within the jurisdiction of such department or agency.

CARLSBAD, NEW MEXICO