

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

NM0454228-A

6. If Indian, Allottee or Tribe Name

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

Southwest Royalties, Inc.

3. Address and Telephone No.

Box 953, Midland, TX 79702 (915) 684-6381

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1594 FNL & 660 FWL

Sec. 2 T 215 R 25E

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Levers Federal #1

9. API Well No.

3001520174

10. Field and Pool, or Exploratory Area

Spring

11. County or Parish, State

Eddy, New Mexico

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 Change in Operator

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completions 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.)

Effective 5-1-91 Southwest Royalties has taken over the operation for the referenced well previously operated by Conoco, Inc.

RECEIVED

MAY 3 10 06 AM '91
CARLSBAD
AREA HEADQUARTERS

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

Signed Jean Ellison Jean Ellison Title Agent

Date 5-2-91

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____