

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN THE
(Other, instruct
reverse side)

FOR
ICATE
ON RE

Budget Bureau No. 1004-
Expires August 31, 1988

46K

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

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. WELL ☐ WELL ☒ OTHER

JUL 25 '88

2. NAME OF OPERATOR

Petrus Oil Company, L. P.

O. C. D.
ARTESIA, OFFICE

3. ADDRESS OF OPERATOR

12377 Merit Drive, Suite 1600 Dallas, Texas 75251

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

At surface

Unit letter A, 660 FNL and 660 FEL
of Section 12.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5. LEASE DESIGNATION AND SERIAL NO.

0553283

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

FEDERAL 12 Com

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

BYKTON FLAT (MORROW)

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 12, T15, R26E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

16.

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

NOTICE OF INTENTION TO

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR

REPAIR

REPAIR

Ownership change

XX

Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form

17. DESCRIBE PROPOSED OR COMPLETED OPERATION. (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 the work.)

Effective June 1, 1988, Petrus Oil Company, L. P. acquired the above property
from Mobil Producing TX & NM Inc.

ACCEPTED FOR RECORD

JUL 21 1988

CARLSBAD, NEW MEXICO

CARLSBAD
AREA OFFICE

JUL 20 11 01 AM '88

RECEIVED

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

SIGNED Suzann Welch Suzann Welch

TITLE Regulatory Coordinator

DATE 07-14-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side