

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION
Drawer DD
Artesia, NM 88210

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

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

RECEIVED

MAY 16 '94

C. C. D.

ARTESIA OFFICE

686-9927

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Southwest Royalties, Inc. ✓

3. Address and Telephone No

P.O. Box 11390, Midland, Texas 79702 (915) 686-9927

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

960' FSL & 1980' FWL

Sec. 34, T-20-S, R-26-E

5. Lease Designation and Serial No.

NM - 34458

6. If Indian, Allottee or Tribe Name

N/A

7. If Unit or CA, Agreement Designation

N/A

8. Well Name and No.

Federal 34 #1

9. API Well No.

30-015-22738

10. Field and Pool, or Exploratory Area

Springs Upper Penn (Gas)

11. County or Parish, State

Eddy County, New Mexico

12 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 Casing Integrity Test

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

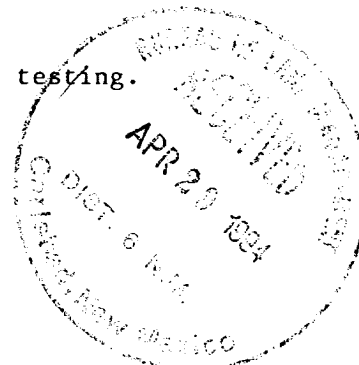
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

Proposed procedure for testing downhole equipment/casing.

Procedure and wellbore diagram attached.

Will notify (505) 887-6544 / 48 hours before testing.



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

Signed

[Signature]

Title

Regulatory Agent

Date

4-28-94

(This space for Federal or State office use)

Approved by

(OPIC, SED.) JOE G. LARA

Title

PETROLEUM ENGINEER

Date

5/13/94

Conditions of approval, if any:

test to be performed within 30 days.