

Form 3160-5  
(June 1990)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

## 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

Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM34458
Name of Operator SOUTHWEST ROYALTIES, INC.	6. If Indian, Allottee or Tribe Name
Address and Telephone No. P.O. BOX 11390, MIDLAND, TX 79702 (915) 686-9927	7. If Unit or CA, Agreement Designation
Location of Well (Footage, Sec., T., R., M., or Survey Description) 960' FSL AND 1980' FWL SEC. 34, T-20S, R-26E	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
	11. County or Parish, State EDDY COUNTY, NM

## CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>CASING INTEGRITY TEST</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

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 DOWNHOLD EQUIPMENT/CASING.

PROCEDURE AND WELLBORE DIAGRAM ATTACHED.

WILL NOTIFY (505) 887-6544 48 HOURS BEFORE TESTING.

I hereby certify that the foregoing is true and correct		
Signed <u>[Signature]</u>	Title <u>REGULATORY ASST.</u>	Date <u>11-2-94</u>
(This space for Federal or State office use)		
Approved by <u>[Signature]</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>12/5/94</u>
Conditions of approval, if any: <u>See attached. Test to be performed within 18 days</u>		