

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SEP - 7 1992

O. C. D.
OFFICE

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

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

BASS ENTERPRISES PRODUCTION COMPANY

3. Address and Telephone No.

P.O. BOX 2760, MIDLAND, TEXAS 79702-2760

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

1980' FWL & 660' FSL OF UNIT LETTER N
SEC. 8, T21S, R29E

5. Lease Designation and Serial No.

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

NM-061P3587C444

8. Well Name and No.

BIG EDDY #85

9. API Well No.

30-015-23629

10. Field and Pool, or Exploratory Area

GOLDEN LANE (MORROW)

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	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other RETRUN WELL TO PROD.	<input type="checkbox"/> 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.)*

RETURN WELL TO PRODUCTION

ACCEPTED FOR RECORD

6 SEP 16 1992

CARLSBAD, NEW MEXICO

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

Signed

[Signature]

Title

SENIOR PRODUCTION CLERK

Date

SEPTEMBER 8, 1992

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date