CCD- Artesia

SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill, or to deepen or recettry to a different reservoir  Use "APPLICATION FOR PREMITT TO DRILL" for such proposals  T. Type of Well  I. Type of Well  X. Oil Well  Gas Well  Other:  S. Well Name and No.  Address and Telephone No.  P. O. Box 2608, Midland, Texas 79702  4. Location of Well (Footage, T. R. M., or Survey Description)  1980 FWL & 1980 FSL  Section 1, T.2-1-8, R.2-7-B  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X. Roomeletion Report  Altering Casing  District Proposed or Completed Creations of Well and description on Well Conversion to Highest Conversion to Misselform of Medical Conversion to Misselform of Well at Steady of Highest Conversion to Misselform of Well at Steady of Parks of West Conversion to Misselform of Well at Steady of States and Telephone No.  Altering Casing  District Proposed or Completed Creations and descreed and new vertical depths to all medicate and analysis completion or Well  The Bushon Conversion of Casing Repair Conversion to Misselform of Medical Conversion of Medical Conversion to Misselform of Medical Conversion o	Form 3160-5 (June, 1990)	DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT						Budget Bureau No. 1004-0135 Expires: March 31, 1993				
SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this from for preposals to fifth, or to degen or resently as different reservoir  Use "APPLICATION FOR PERMIT TO BRILL" for such proposals  SUBMIT IN TRIPLICATE  1. Type of Well  2. Name of Operator  TOM BROWN, INC.  Darfene Jordan  TOM BROWN, INC.  Phone: (915) 688-9472  3. Address and Telephone No.  P. O. Box 2608, Midland, Texas 79702  4. Location of Well (Footage, T. R. M. or Survey Description)  1980 FWL & 1980 FWL  Section 1, T-21-S, R-27-B  1. County or Partial, State  Edity Co., New Mexico  TYPE OF SUBMISSION  TYPE OF SUBMISSION  TYPE OF ACTION  A Abandonferst  Recompletion  Plugging Back Altering Cashing Plugging Back Altering Cashing Plugging Back Altering Cashing Altering Cashing Tother Web (2006)  1. Describe Proposate of Completes Constituted on Management Molice  Under The Production Analyst  Date:  Press test and are cord w/chart to 480 psi,  Supposed Will give subsurface locations and manured and now vertical depth for all markets and nows permissed to this work.)*  Supposed Will is TA  Supposed by Corrier of Complete Constitution Analyst  Date:  Petruary 9, 2001  Title:  Poptival Name Engineer  Title:  Poptival Name Engineer  Date:  Petruary 9, 2001  Pageroved by Corrier of Complete Completes Constitution Analyst  Date:  Petruary 9, 2001  Pageroved by Corrier of Complete Completes Constitution Analyst  Title:  Poptival Name Engineer  Date:  Petruary 9, 2001	(,) Solutio of Little International											
Do not use this form for proposals to drill, or to deepen or reentry to a different reservoir  Use "APPLICATION NOR PERMITT TO DRILL" for such proposals  NAM  SUBMIT IN TRIPLICATE  1. Type of Well  X Oil Well Gas Well Other:  8. Well Name and No.  H.W. STOTT FED #1  7. If Unit or CA, Agreement Designation  TOM BROWN, INC.  Phone: (915) 688-9472  9. APIWell No.  2. Address and Telephone No.  P. O. Box 2608, Midland, Texas 79702  4. Location of Well (Footage, T. R. M. or Survey Description)  1980 F.W.L. & 1980 F.SL.  Section 1, T-21-8, P-27-B  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X Advandomfent  X Notice of Intent  PERMISSION  X Advandomfent  X Recompletion  Plugging Back Non-Routine Fracturing  Subsequent Report  Casing Repair  Altering Casing Dispose Water  Other:  Other:  10. Describe Proposed of Completed Operations (Clearly state all permism dates, including estimated date of surfing any proposed work.  If well is directionally drilled, sev substrates to extending and measured and the vertical drybs for all enabets and encereptients to this work.)*  Signed:  Children Report  1 MIR RU PU  2 TOH withs 3 THE WCIBP, set @ 2763' 4 Circ hole w/294 KCL 5 Press test and record w/chart to 480 psi, 6 Well is TA  Signed:  Children Report  Children Report  Children Report  Children Report  Children Report  Children Report  Conversion to Injection  Dispose Water  (Note: Report reads of studies or greated or Study Green work.)  1. Distribe Proposed or Completed Operations (Clearly state all permittent dates, including estimated date of surfing any proposed work.  If well is directionally drilled, give substrates because and measured and the vertical drybs for all enabets and encerperiments to this work.)*  Signed:  Proposed by Children Report  C	SUNDRY NOTICES AND REPORTS ON WELLS								1			
SUBMIT IN TRIPLICATE  1. Type of Well    X   Oil Well   Gas Well   Other:   8. Well Name and No.	Do not use this form for proposals to drill, or to deepen or reentry to a different reservoir								···			
1. Type of Well	Use "APPLICATION FOR PERMIT TO DRILL" for such proposals								N/A			
X Oil Well   Other:   8. Well Name and No.									nit or CA, A	greement	Designation	
2. Name of Operator TOM BROWN, INC.  3. Address and Telephone No. Phone: (915) 688-9472 P. O. Box 2608, Midland, Texas 79702 P. O. Box 2608, Midland, Texas 79702 P. O. Box 2608, Midland, Texas 79702 P. C. Box 2608, Midland, Texas 797	1. Type of Well										-	
TOM BROWN, INC.  Phone: (915) 688-9472  3. Address and Telephone No. P. O. Box 2608, Midland, Texas 79702  4. Location of Well (Footage, T. R. M., or Survey Description) 1980' FWL & 1980' FSL Section 1, T-21-15, R-27-B  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPO OF SUBMISSION  X. Notice of Intent X. Recompletion Non-Routine Fracturing Subsequent Report Casing Repair Pinal Abandomment Notice Sufface Casing/Cementing Other: Other Proposed or Completed Operations (Clearly sast all perfusent details, and give perfusent data, including estimated data of starting any proposed work.  If well is directionally dailed, give asburdere locations and neasured and true vertical depth for all markets and zones perfuses to this work.)*  Signed:  Approved by UNIS. SED JOSE G. TARA  Conditions of approval, if any:  Title:  Production Analyst Date: February 9, 2001  Title:  Production Analyst Date: February 9, 2001  Title:  Potentian Engineer  Date: Will 2012  Date: Will 201		Oil Well	Gas Well		Other:			8. We	ll Name and	No.		
3. Address and Telephone No. P. O. Box 2608, Midland, Texas 79702 4. Location of Well (Footage, T. R. M. or Survey Description) 1980 FWL & 1980 FSL Section 1, T-21-S, R-27-E 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  X. Notice of Intent X. Recompletion Plugging Back Abandomment Subsequent Report Casing Repair Altering Casing Unifer Casing/Cementing Final Abandomment Notice Other: (lose Report seal of subjection to Injection Dispose Water Other) Other: (fixed Report seal of subjection Report and log from).  13. Describe Proposed or Completed Operations (Clearly state all perintent details, and give perintent date), and give perintent date is and construction and properties on the seal of the starting any proposed work.  14. Well is directionally drilled, give subsurface locations and measured and true vertical depths for all markets and zones pretisents to his work.)  Signed:  X. Notice of Intent X. Notice of Intent X. Recompletion Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (lose Report result or simple completion or Well Completion or Recompletion Papert and log from).  13. Describe Proposed or Completed Operations (Clearly state all perintent details, and give perintent dates, mckding estimate date of starting any proposed work.  14. Well is directionally drilled, give subsurface locations and measured and true vertical depths for all markets and zones pretisents to his work.)  Signed:  X. Abandomment X. Recompletion New Construction New	2. Name of Operator				Darlene Jordan				H.W. STOTT FED #1			
P. O. Box 2608, Midland, Texas 79702  4. Location of Wolf (Footage, T. R., M. or Survey Description)  1980 FWL, & 1980 FSL  Section 1, T-21-S, R-27-E  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X. Abandonment  X. Notice of Intent  X. Recompletion  Plugging Back  Subsequent Report  Casing Repair  Altering Casing  Other:  Other Completed Operations (Clearly state all pertinent data), and give pertinent date, including estimated date of suring a yarder work. Provided the work, P.  13. Describe Proposed or Completed Operations (Clearly state all pertinent data), and give pertinent dates, including estimated date of suring a yarder work.  14. MI RU PU  2. TOH wirbts  3. THE WCIBP, set @ 2763*  4. Circ hole w/29% KCL  5. Press test and record w/chart to 480 psi,  6. Well is TA  Signed.  Signed.  Charge of Plans  Non-Routine Fracturing  Water Shate.  Conversion to Injection  Dispose Water  Chore Report state all pertinent data, including estimated date of suring a yar proposed word.  If well is directionally drilled, give subsurface locations and massared and one vertical dapths for all markets and zones pertinent to this work.)  Signed.	TOM	I BROWN, INC.	(915) 68	8-9472		9. API	Well No.					
P. O. Box 2608, Midland, Texas 79702  4. Location of Well (Footage, T. R. M. or Survey Description)  1980 FWL & 1980 FSL  Section 1, T-21-S, R-27-B  12. CHECK APPORIANTE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  197 GR TYPE OF ACTION  X Notice of Intent  X Recompletion  Plugging Back  Non-Routine Fracturing  Water Shut-Off  Caring Repair  Altering Casing  Other:  (Note: Report results of multiple competion on Well Comprehence or Completed Operations (Clearly state all pertinent dates, including estimated date of starting ary proposed work.  If well is directionally drilled, give subsurface locations and measured and two vertical depths for all markets and 20ses pertinent to this work.)  Signed:  Non-Routine Fracturing  Other:  (Note: Report results of multiple competion on Well Completion on Well Completion on Well Completion or Recompletion Report and Log form).  13. Describe Proposed or Completed Operations (Clearly state all pertinent dates, including estimated date of starting ary proposed work.  If well is directionally drilled, give subsurface locations and measured and two vertical depths for all markets and 20ses pertinent to this work.)  Signed:  Altering Casing  One of Plans  Non-Routine Fracturing  Water Shut-Off  Conversion to Injection  Dispose Weller  (Note: Report results of multiple completion on Well Completion on Reventible Reports of the Well of the Completion of Reports of the Well of the Completion on Well Completion on Reventible Reports of the Well of the Completion of Repairs of the Well of the Completion of Repairs of the Well of the Completion of Reports of the Well of the Completion of Repairs of the Well of the Completion of Reports of the Well of the Completion of Reports of the Well of the Completion of Repairs of the Well of the Completion of Reports of the Well of the Completion of Repairs of the Well of the Completion of Repairs of the Well of the Completion of Reports of the Well of the Completion of Reports of the Well of the Completion of	3. Address and Te	lephone No.					30-015-25137					
A. Location of Well (Footage, T. R. M. or Survey Description)  1980 FWL & 1980 FWL  Section 1, T-21-S, R-27-B  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X	P. O.	Box 2608, Midlan	d, Texas 79702	2			.5	10. Fie	ld and Pool,	or Explor	atory Area	
Section 1, T-21-S, R-27-B  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X Notice of Intent  X Recompletion  Subsequent Report  Subsequent Report  Altering Casing  Final Abandonment Notice  Other:  Casing Repair  Altering Casing  Other:  (Note: Report results of multiple completion on thicking on Dispose Water  (Note: Report results of multiple completion on Well Completion of Recompletion Report and Log form).  I) Describe Proposed or Completed Operations (Clearly state all perticute 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 markets and zones pertinent to this work.)*  I MI RU PU  2 TOH w/tbg  3 THH w/CIBP, set @ 2763'  4 Circ hole w/2% KCL  5 Press test and record w/chart to 480 psi,  6 Well is TA  Signed:  Approved by CRIGE. Septem of Superfice users  Title: Production Analyst  Date: Pebruary 9, 2001  Petrolarum Enofineer  Date: JHJ 2001  Date: JHJ 2001  Title: Date: JHJ 2001  Date: JHJ 2001	4. Location of We	ll (Footage, T, R, M, o	r Survey Descripti	ion)				1				
Section 1, T-21-S, R-27-E  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION    X	1980	L	RECEIVED									
TYPE OF SUBMISSION  TYPE OF SUBMISSION  Abandonfient  Non-Recompletion  Surface Casing/Cementing  Other:  (Note: Report retails of multiple completion on Well Completion or Recompletion Report and Log form)  13. Deterthe Proposed or Completed Operations (Clearly vate all pertinent data), and give pertinent dates, including estimated date of surring any proposed work.  If well is directionally drilled, give subsurface incations and measured and two vertical depths for all nursices and zones pertinent to this work.)  I MI RU PU  2 TOH w/tbg  3 TIH w/CIBP, set @ 2763'  4 Circ hole w/2% KCL  5 Press test and record w/chart to 480 psi,  6 Well is TA  Signed:  (This space for Federal or Sub-figure use.)  Title: Production Analyst Date: February 9, 2001  Potentiarum Engineer  Date: 344,2001  Title: Date: 344,2001	Secti	-E			OCD - ARTESIA	2 3 3 2 3				v Mevico		
TYPE OF SUBMISSION  X Notice of Intent  Recompletion  Non-Routine Fracturing  Subsequent Report  Casing Repair  Altering Casing  Other: Other Recompletion or Non-Routine Fracturing  Other: Observe Proposed or Completed Operations (Clearly state all pertinent dates), 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 markets and zones pertinent to this work.)?  I MI RU PU  2 TOH w/tbg  3 TIH w/CIBP, set @ 2763'  4 Circ hole w/2% KCL  5 Press test and record w/chart to 480 psi, 6 Well is TA  Signed:  Signed:  Signed:  Title:  Production Analyst  Date:  February 9, 2001  Title:  Casing Repair  Non-Routine In Sew Construction New Construction Non-Routine Fracturing Water Shut-Office on Sew Construction Non-Routine Fracturing Voores for successing Construction Non-Routine Fracturing Non-Routine				NDICA	TE NATU	RE OF NOTICE, RE	PORT.	OR OTH	ER DATA		V IVICAICO	
Subsequent Report	T	YPE OF SUBMISSION	N								<del></del>	
Subsequent Report    Subsequent Report   Surface Casing Repair   Casing Repair   Casing Repair   Casing Repair   Casing Repair   Choler Reports 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 surface and proposed work. If well is directionally drilled, give subsurface locations and measured and ruc vertical depths for all nurkets and zones pertinent to this work.)*    1 MI RU PU	<del>г 5</del> -	T	1	X				4	_			
Subsequent Report  Final Abandonment Notice  Surface Casing Cementing Surface Casing/Cementing Other:  (Note: Report results of multiple completion on Well Completion of Completion of Completion on Well Completion of Completion of Completion on Well Completion of Note of Completion on Well Completion of Completion on Well Completion of Note of Completion on Well Completion of Note of Completion on Well Completion of Well Completion on Well Completion of Completion on Well Completion of Completion of Completion on Well Completion	<u> X</u>	Notice of Intent	-		-			4			•	
Final Abandonment Notice   Surface Casing Conversion to Injection Dispose Water   Other:	<del></del>	Subsequent Report	-				<u> </u>			turing		
Final Abandonment Notice Other: Other: (Note: Report realts of multiple completion on Well 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 markets and zones pertinent to this work.)*  I MI RU PU 2 TOH W/tbg 3 TIH w/CIBP, set @ 2763' 4 Circ hole w/2% KCL 5 Press test and record w/chart to 480 psi, 6 Well is TA  Signed: Well is TA  Signed: Dispose Water (Note: Report and Log form).  Completion on Well	<u>L</u>	] ouosoquem report	<u> </u>		_	-		4		ation		
Other: (Note: Report results of multiple completion on Well Completion of 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 markets and zones pertinent to this work.)*  1 MI RU PU 2 TOH w/tbg 3 TIH w/CIBP, set @ 2763' 4 Circ hole w/2% KCL 5 Press test and record w/chart to 480 psi, 6 Well is TA  Signed: Well is TA  Signed: Date: February 9, 2001  Title: Production Analyst Date: February 9, 2001  Title: Date: J// Jocc/  Date: J// Jocc/  Title: Jord Million Science of Pertination Science of Science		Final Abandonmen	t Notice		_	-		4		CHOH		
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 markets and zones pertinent to this work.)*  1 MI RU PU 2 TOH w/tbg 3 TIH w/CIBP, set @ 2763' 4 Circ hole w/2% KCL 5 Press test and record w/chart to 480 psi, 6 Well is TA  Signed: Well is TA  Signed: Title: Production Analyst Date: February 9, 2001  This page for Federal or Starting any proposed work.  Title: Production Analyst Date: February 9, 2001  Title: Operations Engineer  Conditions of approval, if any:		_				0 0	(Note: Re			mpletion on	Well	
I MI RU PU 2 TOH w/tbg 3 TIH w/CIBP, set @ 2763' 4 Circ hole w/2% KCL 5 Press test and record w/chart to 480 psi, 6 Well is TA  Signed: Approved by Orlig. Seg.) Joe G. Lara  Title: Production Analyst Date: February 9, 2001  Title: Orling Engineer  Date: 3/1/2001			L		·		Completic	on or Reco	mpletion Repor	t and Log fo	rm)	
(This space for Federal or State office use) Approved by (ORIG. SGD.) JOE G. LARA  Title:  Conditions of approval, if any:  Title:  Title:  Date: 3/1/200/	2 3 4 5	TOH w/tbg TIH w/CIBP, set ( Circ hole w/2% K Press test and reco	CL	80 psi,	500				A SULUTION SOUNCE AREA	12 P 12: 4		
Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false fictitions or	(This s					<del></del>	rineer		3/1/20	Februa	ry 9, 2001	
, programment to make to any department of agency of the limber Make any large inchings of	Title 18 U.S.C. Section 1	001, makes it a crime for any	y person knowingly and	l willfully	to make to an	y department or agency	f the Unite	States	v falce Societa	· Ar		