

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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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  
TOCO L. L. C.

3. Address and Telephone No.  
P. O. BOX 888, HOBBS, NM 88241 (505) 393-2727

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
660' FNL & 330' FEL  
SECTION 16, T20S, R29E

5. Lease Designation and Serial No.

NM-0554771

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

TOG FEDERAL #9

9. API Well No.

30-015-29040

10. Field and Pool, or Exploratory Area

BURTON DELAWARE, EAST

11. County or Parish, State

EDDY CO., NM

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

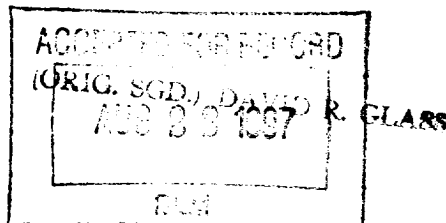
TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other DAILY DRILLING REPORTS  
☐ 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.)\*

07/10/97 Install 15 HP 41' submersible pump.  
07/15/97 Install flowline to TOG #2 tank battery.  
08/01/97 260 BW 30 hr. Shut down pump to test well.  
08/02/97 24 hr. shut in showed water level @ 282' FS  
08/09/97 Lay down pump.



RECEIVED  
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BUREAU OF LAND MANAGEMENT  
ROSWELL OFFICE

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

Manager for Oil Reports & Gas Services, Inc.  
Agent for TOCO, L.L.C.

Signed David R. Glass Title Agent for TOCO, L.L.C. Date 08/18/97

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any: