

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

FEB 13 1992

O. C. D.
ARTIFICIAL OFFICE

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

5. Lease Designation and Serial No.
NM-3597

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. *Fed*
Mershon 17 No. 1

9. API Well No.

10. Field and Pool, or Exploratory Area
Eddy Undesignated (Penn)

11. County or Parish, State

Eddy

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Barbara Fasken

3. Address and Telephone No.

303 W. Wall, Suite 1900, Midland, TX 79701-5116

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

1980' FSL & 1980' FWL, Sec. 17, T-23-S, R-23-E

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.)*

Performed Casing Integrity Test on 1-8-92 as follows:

Loaded tubing-casing annulus with 20 bbls. of 2% KCl water and pressured to 500 psi for 30 minutes with no leak off observed. Test witnessed by Kathy Queen with B.L.M. and Darrell Moore with N.M.O.C.D.

Operator proposes to leave well in temporarily abandoned status until a natural gas pipeline connection becomes available.

APPROVED FOR 121-8-92-93
ENDING

2155
C/B

RECEIVED
FEB 5 11 27 AM '92
CARLESON
AREA HEADQUARTERS

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

Signed [Signature]

Title Drilling & Operations Supt.

Date 2-3-92

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: