

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

45F

OCT 25 '94

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

ARTESIA, OFFICE

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Bettis, Boyle & Stovall

3. Address and Telephone No.

P.O. Box 1240, Graham, TX 76450

817-549-0780

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

1380' FSL & 990' FEL, Sec. 28, T23S, R29E

5. Lease Designation and Serial No.

NM-67103

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

LAGUNA GRANDE #1

9. API Well No.

30-015-21636

10. Field and Pool, or Exploratory Area

Wildcat-Bone Springs

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

- ☐ 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.)

9/21/94- 12 hrs SITP = 20 PSI, dry formation gas. RU to swab, IFL = 4400' from sur. Swab dry in 2 runs. SI f/ 1 hr & check entry - no entry. SIFN  
9/22/94- 18 hrs. SITP = 10 PSI. IFL = 4300' from sur. Made 2 swab runs. SIFN

RECEIVED  
SEP 28 12 51 PM '94  
CARLISLE  
AREA OFFICE

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

Signed

*[Signature]*

Title Regulatory Analyst

Date 9/22/94

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date

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, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side