

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC060613
2. Name of Operator MYCO INDUSTRIES, INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 207 S 4th, ARTESIA, NM 88210	7. If Unit or CA, Agreement Designation BIG EDDY UNIT
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 990' FNL & 990' FEL Sec. 10-T22S-R28E	8. Well Name and No. BIG EDDY UNIT # 106
	9. API Well No. 30-015-25150
	10. Field and Pool, or Exploratory Area E. INDIAN DRAW DELAWARE
	11. County or Parish, State EDDY, NM

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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>DIAGRAM</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<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.)\*

ATTACHED PLEASE FIND UPGRADED FACILITY DIAGRAM

*J. Bruno*



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

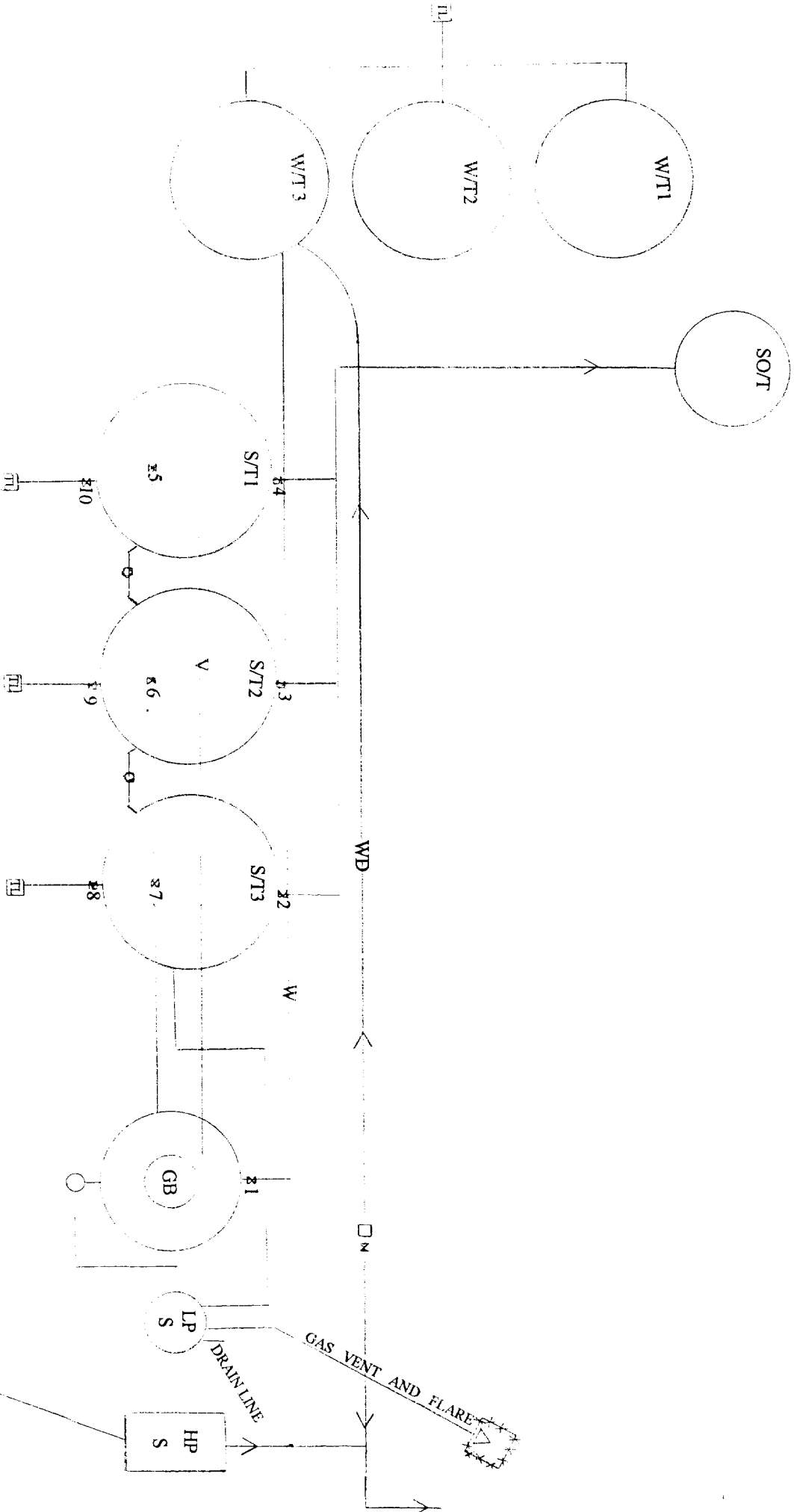
Signed Hilda M. Merand Title ENGINEERING TECHNICIAN Date 11/13/92

(This space for Federal or State office use)

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

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



SITE FACILITY DIAGRAM  
MYCO INDUSTRIES, INC.  
**BIG EDDY #106 & 107 LC060613**  
#106 - 990' FNL. & 990' FEL UNIT A  
#107 - 990' FNL. & 1500' FEL UNIT B  
Sec. 10-T122S-R28E

- PRODUCTION SYSTEM - OPENED
- Oil Sales By Tank Gauge To Tank Truck
  - Seal Requirements:
    - Production Phase  
OPEN: 1, 5, 6, 7  
CLOSED: 2, 3, 4, 8, 9, 10
    - Sales Phase:  
OPEN: 1, 8, 9, 10  
CLOSED: 2, 3, 4, 5, 6, 7

LOCATION OF SITE SECURITY PLAN:  
MYCO INDUSTRIES, INC.  
207 S 4TH ST  
ARTESIA, NM 88210

*J. Flores*