

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION *C/SF*  
Drawer DD  
Artesia, NM 88210

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

W. A. MONCRIEF, JR.

3. Address and Telephone No.

MONCRIEF BUILDING, NINTH @ COMMERCE, FW, TX 76102

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

NWSW SEC. 4 T23S R24E

5. Lease Designation and Serial No.

NM 54839

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

NM 82090

8. Well Name and No.

ROBINIA DRAW FEDERAL #1

9. API Well No.

30-015-26097

10. Field and Pool, or Exploratory Area

BANDANA POINT UPPER PENN

11. County or Parish, State

EDDY COUNTY, NEW MEXICO

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 APPROVAL FOR OFF LEASE  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

MEASUREMENT OF GAS.

(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.)\*

LOCATION OF EL PASO NATURAL GAS MEASURING FACILITY  
SENE SEC. 6 T23S R24E

RECEIVED

JUN 20 1995

OIL CON. DIV.  
DIST. 2

MAY 15 8 52 AM '95

RECEIVED

ACCEPTED FOR RECORD

JUN 20 1995

CARLSBAD, NEW MEXICO

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

Signed

*Cathy Salcom*

Title AGENT

Date 5/11/95

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date