

Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

RECEIVED

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 ADD 1 7 40

BURFAU OF	LAND MANAGEMENT	5. Lease Designation and Serial No.
SUNDRY NOTICES AND REPORTS ON WELLS		NM81910
	ill or to deepen or reentry to a different reserve	6. If Indian, Allottee or Tribe Name
	R PERMIT—" for such proposals	5 ¹¹ .
	Tot dan proposato	
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
	IN THIT LIGATE	
1. Type of Well		
Oil X Gas Other /		8. Well Name and No.
2. Name of Operator		Crystal, 9105 JV-P #1
BTA Oil Producers /		9. API Well No.
3. Address and Telephone No.		30-015-26898
104 S. Pecos, Midland, TX 79701 (915) 682-3753		10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		
1150' FSL & 1650' FEL		Carlsbad South, Morrow 11. County or Parish, State
Sec 4, T24S, R26E		11. County of Parish, State
500 4, 1245, R20L		T11 0 m
		Eddy Co., NM
CHECK APPROPRIATE BOX	s) TO INDICATE NATURE OF NOTICE, RE	PORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Channel
The state of them		Change of Plans
Subsequent Report	Recompletion	X New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
	L Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	Other <u>Rig Release</u>	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 a	l pertinent details, and give pertinent dates, including estimated date of st	arting any proposed work. If well is directionally drilled.
give subsurface locations and measured and true verti-	al depths for all markers and zones pertinent to this work.)*	
3-15-92: Depth 9030' DST #1	(Wolfcamp) 8768-8907	
4-3-92: TD 12060', Cmtd 5-1	/2" N80 LTC 17 & 20# csg @ 12060' w	1/2300 sx. Set slips
& cut off, TOC @ 25	80' by temp survey.	, ===== ===, =========================
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Released Rig 11:00	o.m.	
	•	Art Commence
Prep to complete.		
	<i>1</i> -10	
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		The William Region of the Control
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14. I hereby certify that the specious is true and correct		
Signed Walky Volume	Title Regulatory Administrator	Date 4-7-92
John Marie Control	THE MEASURE NOTICE AND AUGUST ACCURATION	Date 4-7-92

(This space for Federal of State office use) Title .