

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

NOV - 2 1992

O. C. D.
ARTESIAN OFFICE

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

5. Lease Designation and Serial No.

NMNM-29234

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Littlefield Federal #1

9. API Well No.

3001510259

10. Field and Pool, or Exploratory Area

Delaware Wildcat

11. County or Parish, State

Eddy Co., NM

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 WDW

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)

660' FNL & 1980' FEL of Sec. 11, T24S, R31E

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 CSG 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.)*

9/28/92 - XL Transportation performed a casing integrity test. Pressured casing to 500# for 30 min. Well held good. Mr. Gary Williams w/ the OCD witnessed the test and took the chart with him.

29 1992

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

Signed [Signature] Title Production Analyst

Date 10/9/92

(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