

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE
(Other instructions on re-
verse side)

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-11042

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. CIL WELL ☐ GAS WELL ☒ OTHER ☐ FEB 01 1993

2. NAME OF OPERATOR J.C. WILLIAMSON

3. ADDRESS OF OPERATOR P.O. BOX 16 MIDLAND, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface 660' FSL & 1980' FWL

7. UNIT AGREEMENT NAME

ROSS DRAW

8. FARM OR LEASE NAME

ROSS DRAW UNIT

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

ROSS DRAW DELAWARE (GAS)

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 27, T26S, R30E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

2008.2' DF

12. COUNTY OR PARISH

EDDY

13. STATE

NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐

PULL OR ALTER CASING

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☐
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☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Test downhole equipment/csg.

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

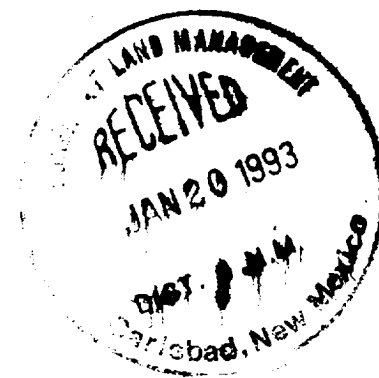
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(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. 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.) *

(1) With present downhole situation w/packer set @ 3500'±, test annulus between 4-1/2" casing and 2-3/8" casing to 500#, if pressure holds, temporary abandonment status will be requested.

(1) If casing does not hold, remedial measures may be taken to repair the leak, or the well will be plugged and abandoned.



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

SIGNED Jan Pfister for REW

TITLE Engineer

DATE 01/19/93

(This space for Federal or State office use)

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 1-28-93

*See Instructions on Reverse Side