

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR  
(Other instruct  
verse side)

CATE\*  
on re

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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. OIL WELL ☐ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR  
Ralph E. Williamson
3. ADDRESS OF OPERATOR  
805 One First City Center, Midland, Texas 79701
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

330' FSL & 990' FEL

AUG 7 1987

O. C. D.

ARTESIA, OFFICE

5. LEASE DESIGNATION AND SERIAL NO.

NM 47159

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Yates Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Brushy Draw Delaware

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

Sec. 34  
T-26-S, R-30-E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

14. PERMIT NO.

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

2862 GR

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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☐  
☐  
☐  
☐

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Change of Operator

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐  
☐  
☐  
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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☐  
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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.)\*

I hereby designate Ralph E. Williamson as the Operator of the above described well.

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

SIGNED

R. E. Williamson

TITLE Present Operator

DATE July 28, 1987

(This space for Federal or State office use)

APPROVED BY

Richard J. Mann

TITLE

DATE 8-4-87

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side