

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 ☒ GAS ☐ OTHER
WELL ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

Max Wilson, Inc.

3. ADDRESS OF OPERATOR

P. O. Drawer 1978 - Roswell, NM 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State Requirements.
See also space 17 below.)
At surface:

2,810' PSL and 990' FFL

RECEIVED BY

MAR 04 1986

O. C. D.

ARTESIA, OFFICE

5. LEASE DESIGNATION AND SERIAL NO.

NM 27459

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Monsanto Federal

9. WELL NO.

2

10. FIELD AND TOWN, OR WILDCAT

Wildeal - Delaware

11. SEC., T., R., M., OF BLM. AND
SURVEY OR AREA

Sec. 22, T.25S, R.26E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

14. PERMIT NO.

3001525585

15. ELEVATION (Indicate whether in feet or meters)

3,814' GR

16.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT ON:

TEST WATER SHUT-OFF

PLUG OR ALTER

TESTER ON 2-WAY

REPAIRING WELL

PERMITS TO LAY

MULTIPLE COMPLETION

TRAP OR FLUVENTMENT

ALTERING CASING

REPAIR OR ABANDON

ABANDON*

REPAIRING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

OTHER

(Circle)

Report results of multiple completion on Well
and portion of Completion Report and Log form.

17. COMPLETE REPORT ON THE OPERATIONS. (This is for all partial completions and for pertinent data, including estimated date of starting and
proposed work. If well is directionally drilled, well completion report, well model and true vertical depths for all patterns and zones perti-
nent to this work.)

Covered pit, ripped and seeded, put up road barrier.
Proper dry hole marker is in place.

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

Signature

President

DATE 2/27/86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side