

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

Expires August 31, 1985  
5. LEASE DESIGNATION AND SERIAL

NM 27193

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Artesia, NM 88210

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.)

RECEIVED BY

FEB 27 1986

O. C. D.

ARTESIA, OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Exxon Federal

9. WELL NO.

No. 1

10. FIELD AND POOL OR WILDCAT

Wildcat

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

Sec. 31, T. 25S, R. 29E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

1. OIL ☒ GAS ☐ OTHER ☐  
WELL WELL

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

1,980' FNL and 1,980' FWL

14. PERMIT NO.

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

2,963' GR

16

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

NOTICE OF INTENTION TO:

TEST WATER SHUT OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

OTHER

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANS

Run surface pipe

X

SUBSEQUENT REPORT OF:

WATER SHUT OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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

17. DESCRIBE PROPOSED OR COMPLETE 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.) \*

Will run 450', 8 5/8" casing, circ. w/ 300 sx to surface

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

SIGNED

MAX WILSON, INC.

BY: *Max Wilson* TITLE Secretary

DATE

2/24/86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

2-26-86

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side