

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION  
Dr. or DD  
Artesia, NM 88210

FORM APPROVED  
Budget Bureau No. 1004-0115  
Expires: March 31, 1993

**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

2. Name of Operator

Southwest Royalties, Inc.

3. Address and Telephone No.

P.O. Box 11390, Midland, Texas 79702 (915) 686-9927

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

990' FSL & 1980' FEL Sec. 35, T-25-S, R-29-E

5. Lease Designation and Serial No.

NM - 54290

6. If Indian, Allottee or Tribe Name

N/A

7. If Unit or CA, Agreement Designation

N/A

8. Well Name and No.

North Brushy Draw "A" 35

9. API Well No. Federal #8

30-015-27874

10. Field and Pool, or Exploratory Area

North Brushy Draw (Delaware

11. County or Parish, State

Eddy County, N.M.

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 Set 13-3/8" Casing  
☐ 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.)\*

Spudded: 3-14-94

3-15-94: Ran 605', 13-3/8" casing, cemented w/500 sx Class "C", 4% gel, 2% CaCl, 1/4 PPS floreal, tailed w/150 sx Class "C" 2% CaCl. Circulated 176 sx to pit.

Pressured to 600 #, Held Okay. WOC - 12 hours.

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

Signed [Signature]

Title Regulatory Agent

Date 3-18-94

(This space for Federal or State office use)

Approved by \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Conditions of approval, if any: