

095

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

# OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-015-28587

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

## 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" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER ☐

2. Name of Operator

SOUTHWEST ROYALTIES, INC.

3. Address of Operator

P. O. BOX 11390; MIDLAND, TEXAS 79702

8. Well No.

2

9. Pool name or Wildcat

Brushy Draw North

4. Well Location

Unit Letter E : 1650 Feet From The North Line and 330 Feet From The West Line

Section 36 Township 25S Range 29E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☒

PULL OR ALTER CASING ☐

OTHER: Request Extension of Drlg Permit & ☐

Changes below:

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Southwest Royalties requests an extension to the drilling permit which expires on 1/20/96 on the above. We also request approval of the following changes in plans:

Instead of 3 strings of casing we propose the following:

Hole size	Casing Size	Csg Wt.	Setting Depth	Sxs.	TOC
12-1/4"	9-5/8"	36#	600	750	Circ to Sur
8-1/2"	7"	20#	3300	1200	1000'

Change in TD from 6000' to 3300'

See Attached Sheets.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Beverly Hatfield TITLE Regulatory Coordinator DATE 1-15-96

TYPE OR PRINT NAME Beverly Hatfield TELEPHONE NO 915 686-9927

(This space for State Use)

ORIGINAL SIGNED BY THE W. M. M. DISTRICT SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

JAN 26 1996

APPROVAL VALID FOR 180 DAYS  
PERMIT EXPIRES 7-26-96  
UNLESS DRILLING UNDERWAY