

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Adopted Bureau No. 1004-0135  
Expires: March 31, 1993

C/SK

N.M. Oil & Gas Division  
811 S. 1st Street  
Artesia, NM 87003-1024

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

5. Lease Designation and Serial No.

Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

St Mary Land & Exploration Co.

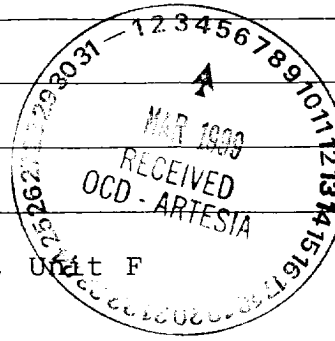
3. Address and Telephone No.

P. O. Box 2726, Midland, TX 79702

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

1980 FNL, 1980 FWL, Sec 1, T28S, R28E, Unit F

25



7. If Unit or CA, Agreement Designation

8. Well Name and No.

Hopi Federal #1

9. API Well No.

30-015-29367

10. Field and Pool, or Exploratory Area

Willow Lake

11. County or Parish, State

Eddy Co., NM

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

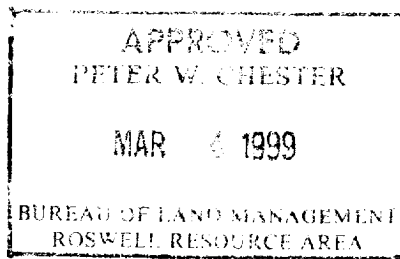
TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other  
☐ 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.)\*

We changed our method of water disposal from trucking to flowline to the Seminole Federal and on to the State MA SWD.



Bureau of Land Management  
Received  
FEB 10 1999  
Carlsbad Field Office  
Carlsbad, N.M.

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

Signature: Gene Lawrence

Title: Regulatory Spec

Date: 2/8/98

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any: \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side