

UNITED STATES
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 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, TX 79702 (915) 686-9927

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

660' FSL & 660' FEL
SEC 27, T-14S, R-27E

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

5. Lease Designation and Serial No.

NMNM91954 83565

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

CASSIDY FEDERAL #1

9. API Well No.

30-015-00912

10. Field and Pool, or Exploratory Area

BUFFALO VALLEY

11. County or Parish, State

CHAVES COUNTY, 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.)*

PLAN TO ALTER THE CASING DESIGN FROM 5 1/2" CASING TO 4 1/2"

CASING AS BELOW:

0-1500' 4 1/2" 11.6# J-55 LT&C CASING
1500'-6500' 4 1/2" 10.5# J-55 ST&C CASING
6500'-8200' 4 1/2" 11.6# J-55 LT&C CASING

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

Signed

[Signature]

Title REGULATORY ASST.

Date 1-18-95

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date