

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

1. OIL WELL GAS WELL OTHER SALT WATER DISPOSAL

2. NAME OF OPERATOR: H.E. PRINCE

3. ADDRESS OF OPERATOR: Box 129 Roswell N.M.

4. LOCATION OF WELL (Report location clearly and in accordance with any requirements. See also space 17 below.)
At surface: 1650' F.S. 4 / 2310' F.E. 4 UNIT K

5. LEASE DESIGNATION AND SERIAL NO.: 65-068127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: _____

7. UNIT AGREEMENT NAME: UNIT K

8. FARM OR LEASE NAME: Fed.

9. WELL NO.: 11

10. FIELD AND POOL, OR WILDCAT: LINN SFW ANDRS

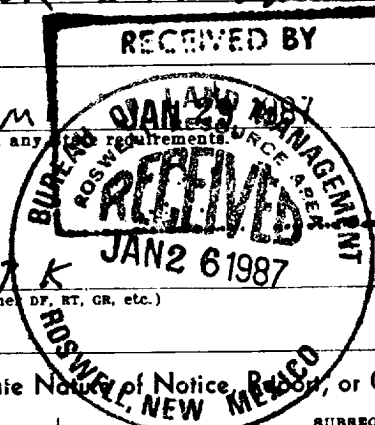
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: S-33, T-6, R26E

12. COUNTY OR PARISH: CHAVES N.M.

13. STATE: _____

14. PERMIT NO.: _____

15. ELEVATIONS (Show whether of, RT, CR, etc.): _____



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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	
(Other) <u>temporary abd.</u> <input checked="" type="checkbox"/>			

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

17. 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.)*

Fed well no. 11 has proven to be a very good well to dispose salt water in. all items were submitted late in 1986; it was taken off the docket because I failed to be present at the hearing. it is now being resubmitted for a salt water disposal well, should have approval within three months. all items are still on file so it will probably be reopened under the case no. assigned to it in 10/14/86 case # 8984

18. I hereby certify that the foregoing is true and correct
SIGNED H.E. Prince TITLE operator DATE 1/23/87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:
APPROVED FOR 12 MONTH PERIOD
ENDING JAN 26 1988
*See Instructions on Reverse Side

APPROVED
DATE _____
PETER W. CHESTER
JAN 26 1987
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

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101 01 01
101 01 01

