

UNITED STATES DEPARTMENT OF THE INTERIOR
 GEOLOGICAL SURVEY

NM OIL & GAS CONSERVATION COMMISSION
 (Other Instructions on Reverse Side)

Form approved. Budget Bureau No. 42-R1424.

1/31

Artesia, NM 88210

5. LEASE DESIGNATION AND SERIAL NO.

050349 A (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECORDING 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.

NOV 22 1985

1. WELL TYPE: WELLS OTHER

Water Injection Well

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Brooks

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT

Empire Y-SR

11. SEC., T., R., M., OR BLM, AND SURVEY OR AREA

19-17-28

12. COUNTY OR PARISH 13. STATE

Eddy

N.M.

Box 648 Artesia, N.M. 88210

330 N. 2310 W. 19-17-28

3625 Gr

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

NOTICE OF INTENTION TO:

1. TEST WATER SAMPLING
 2. REPAIR OR MAINTENANCE
 3. ABANDON*
 4. REPAIR WELL
 5. CHANGE PLUG

SUBSEQUENT REPORT OF:

1. WATER SAMPLING
 2. PRODUCTION TREATMENT
 3. SHUTTING OR ACIDIZING
 4. REPAIRING WELL
 5. ALTERING CASING
 6. ABANDONMENT*

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

17. See instructions on reverse side for details, including estimated date of starting any proposed work. If well is being newly drilled, give subsurface locations and horizontal and true vertical depths for all markers and zones pertinent to this work.*

This well was tested as required by NMCCD and found to have a hole in the casing.

Corrective action to be taken per NMCCD instructions is:

Clean out 7" casing to bottom which is 597'. Run 4 1/2" casing and set at 598'. Set a bridge plug and circulate cement to surface using approximately 110 sacks class C cement. If cement does not circulate will 1" down back side to surface.

Verbal approval was received from Bob Piske 11/4/1985. (BLM)

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

SIGNED: [Signature] TITLE: Operator

DATE: 11/4/85

(Signature for Federal or State office use)

APPROVED BY: [Signature] TITLE:

DATE: 11-20-85

CONDITIONS OF APPROVAL, IF ANY:

Subject to Like Approval by State

*See Instructions on Reverse Side