

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. ILCONS. COMMISSION
P.O. BOX 1980
HOBBS NEW MEXICO 88240
FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC-069224
2. Name of Operator Murphy Operating Corporation	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 2545, Roswell, New Mexico 88202-2545 505-622-1127	7. If Unit or CA, Agreement Designation Northeast Caprock Queen Uni
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330' FNL & 990' FEL Section 21-12S-32E	8. Well Name and No. Northeast Caprock Queen Uni #20
	9. API Well No. 30-025-00156
	10. Field and Pool, or Exploratory Area Caprock Queen
	11. County or Parish, State Lea County, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Repairs	<input type="checkbox"/> 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.)*

In compliance with Notice on Noncompliance #AJM-012-95 dated 12/13/94, Murphy Operating Corporation hereby files notice of its intent to make the necessary repairs to return said well to production prior to April 30, 1995 as indicated in the attached copy of the Plan of Operation for 1994-1995.

JAN 17 1995

14. I hereby certify that the foregoing is true and correct		
Signed <u>Carol J. Garcia</u>	Title <u>Production Records Manager</u>	Date <u>1/11/95</u>
(This space for Federal or State office use)		
Approved by <u>(ORIG. SGD.) JOE G. LARA</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>2/10/95</u>
Conditions of approval, if any:		

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