

UNITED STATES P. O. BOX 88240
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Budget Bureau No. 1004-0100
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
LC-068747

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Northeast Caprock Queen Unit

8. FARM OR LEASE NAME
Northeast Caprock Queen Unit

9. WELL NO.
21

10. FIELD AND POOL, OR WILDCAT
Caprock Queen

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 22, T-12S, R-32E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

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 Injection

2. NAME OF OPERATOR
MURPHY OPERATING CORPORATION

3. ADDRESS OF OPERATOR
P. O. Drawer 2648, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
660' FNL & 660' FWL, Unit Ltr. D

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)
4359' DF

10. 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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input checked="" type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other) return to injection	<input checked="" type="checkbox"/>	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

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.)*

8-2-86 Propose to clean out well to original T.D. @ approx. 3075', perforate from 3014' to 3044' @ 1 J.S.P.F. Run pkr. w/plastic coated 2-3/8" tbg. set @ approx. 2900'. Test annulus to 500# psi & hold for 30 min., circ. annulus w/pkr. fluid, return to injection.

I hereby certify that the foregoing is true and correct

SIGNED Lois T. Brown TITLE Production Clerk DATE July 11, 1986

(This space for Federal or State office use)

APPROVED BY Scott Adams TITLE ACTING AREA MANAGER DATE 7-22-86

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Under 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.