

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OF COPIES REQUIRED
(Other instructions
verse side)

Revised Form No.
M060-3.60-4

5. LEASE DESIGNATION AND SERIAL NO.

State

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☐

2. NAME OF OPERATOR
Murphy Operating Corporation

3a. Area Code & Phone No.
505 623-7210

3. ADDRESS OF OPERATOR
P. O. Drawer 2648, Roswell, New Mexico 88202-2648

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1980' FNL, 660' FWL, Sec. 23-T12S-R32E
Unit Ltr. E

7. UNIT AGREEMENT NAME

Northeast Caprock Queen Unit

8. FARM OR LEASE NAME

Northeast Caprock Queen Unit

9. WELL NO.

32

10. FIELD AND POOL, OR WILDCAT

Caprock Queen

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

Sec. 23-T12S-R32E

12. COUNTY OR PARISH

Lea

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Return to production

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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 perti-
nent to this work.)

Effective March 1, 1991, Murphy Operating Corporation will be returning the
above well back to production. Please make this change on your records.

RECEIVED

FEB 27 1 35 PM '90

BUREAU OF LAND MGMT.
HOUSTON, TEX.

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

SIGNED

Lori Brown

TITLE Production Supervisor

DATE 2/26/91

(This space for Federal or State office use)

APPROVED BY

FOR RECORD ONLY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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, or to knowingly and willfully submit any false, fictitious or fraudulent