

UNIT. STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 062529-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

MARK FEDERAL

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

TODD LOWER SAN ANDRES

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

SEC 25-7S-35E

12. COUNTY OR PARISH

ROOSEVELT

13. STATE

NEW MEX.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

MURPHY MINERALS CORPORATION

3. ADDRESS OF OPERATOR

3103 79TH ST. LUBBOCK, TEXAS 79423

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

1650' FNL & 1650' FEL
SEC. 25, T. 1 S., R. 35 E
ROOSEVELT COUNTY, N.M.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4181 GL

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 PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

TEMPORARILY ABANDON

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 pertinent to this work.)*

THIS WELL WAS ACQUIRED FROM FRANKLIN, PETON.
FRIL 11-1-75 WITH A TA STATUS.
(N)ITIZATION PROCEEDINGS ARE CURRENTLY IN
PROGRESS TO ENABLE A WATERFLOOD IN
THE TODD SAN ANDRES FIELD. REQUEST
PERMISSION TO CONTINUE TA STATUS AS THIS
WELL WILL BE RE-ROUTINED AS PART OF
THE WATERFLOOD PROJECT DEVELOPMENT.

This approval of temporary

abandonment casing

NOV 1 1976

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

SIGNED

Donald L. Taylor

TITLE

Manager

DATE

6-11-76

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

DATE