

U. S. DEPT. OF THE INTERIOR  
P. O. BOX 1980  
HOBBS, NEW MEXICO 88240

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

DEC 29 1992

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: September 30, 1990

**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  
☐ Oil Well ☐ Gas Well ☒ Other **WATER INJECTION WELL**

2. Name of Operator  
**NERIC OIL & GAS COMPANY**

3. Address and Telephone No.  
**P.O. BOX 51311, MIDLAND, TEXAS 79710 (915)683-3171**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**660FSL, 660FEL, S14, T8S, R34E**

5. Lease Designation and Serial No.  
**LC-060978 062178**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

**MILNESAND (SA) UNIT**

8. Well Name and No.

**43**

9. API Well No.

**30-041-10089**

10. Field and Pool, or Exploratory Area

**MILNESAND (SAN ANDRES)**

11. County or Parish, State

**ROOSEVELT**

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection

**COMPLETION OF MECHANICAL TEST**

(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.)

**THE MECHANICAL INTEGRITY TEST HAS BEEN COMPLETED ON THIS WELL, SO THAT  
THIS WELL CAN BE CHANGED TO A "TA" STATUS. THE TEST CHART IS ATTACHED.**

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

Signed **Kevin K. Gafford**  
(This space for Federal or State office use)

**KEVIN K. GAFFORD**

Approved by **TA**  
Conditions of approval, if any, **SUBJECT TO LIKE APPROVAL BY STATE**

**APPROVED FOR 12 MONTH PERIOD  
ENDING JAN 20 1994**

Date **12-24-92**

**APPROVED  
PETER W. CHESTER**  
Date

**JAN 20 1993**

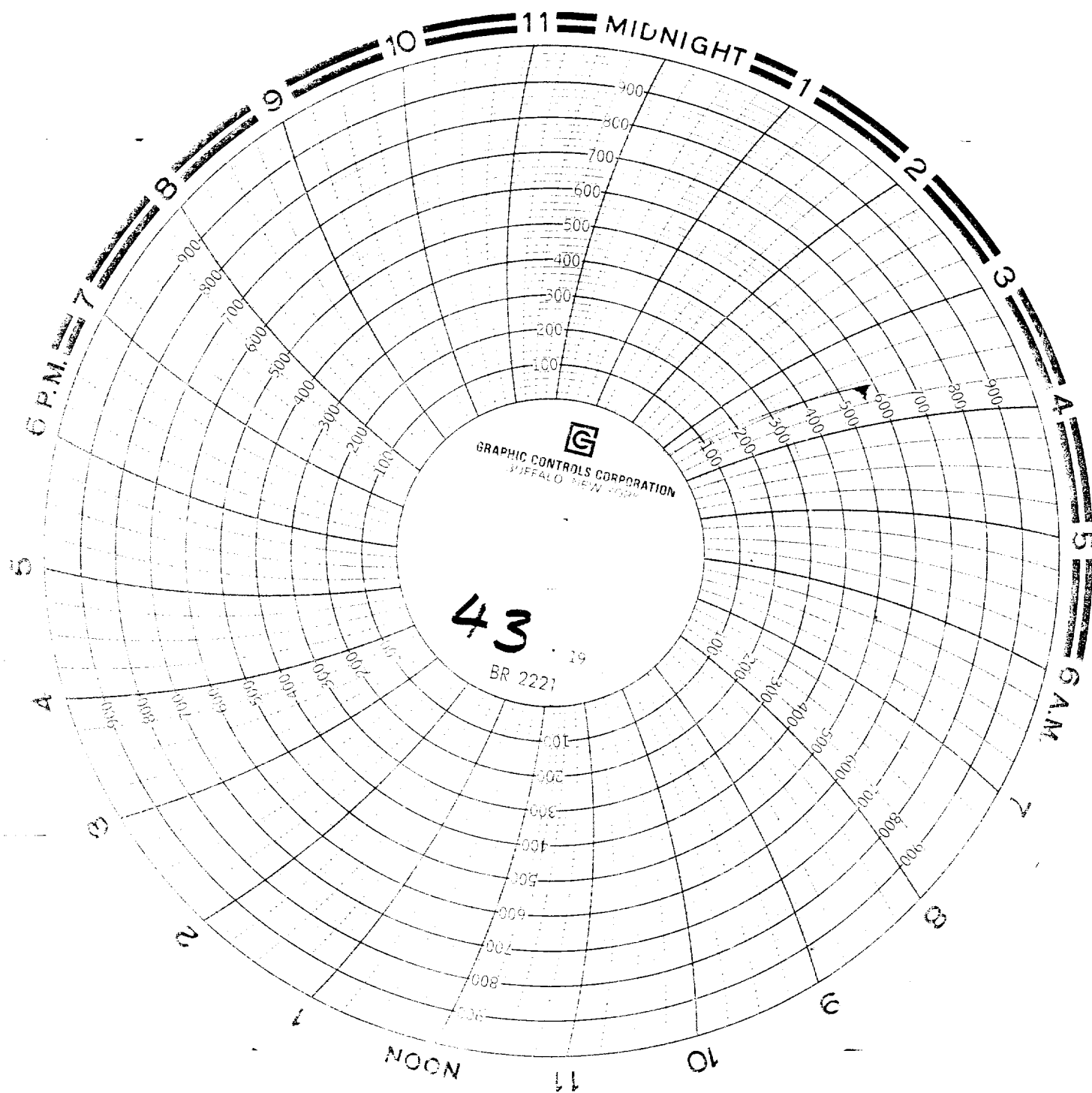
**BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA**

RECEIVED

JAN 21 1993

JOHN HOBBS

1993



RECEIVED

JAN 21 1993

ODD H0836 077

1993

ODD H0836 077