

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-9235
7. Lease Name or Unit Agreement Name Haley Chaveroo San Andres Unit Sec 33
8. Well No. 2
9. Pool name or Wildcat Chaveroo San Andres
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER
2. Name of Operator Murphy Operating Corporation
3. Address of Operator P. O. Drawer 2648, Roswell, New Mexico 88202-2648
4. Well Location Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line Section 33 Township 7 South Range 33 East NMPM Roosevelt County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: Convert to injection well <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Authorization granted by OCD Order No. R-8760 dated October 5, 1988 to inject water into the subject well through ceramic-lined tubing set in a packer located within 100' of the uppermost perforation for the purpose of secondary recovery.

Propose to set packer at approximately 4150' and fill annulus with inert packer fluid and test tubing-casing annulus to 300 psig for 30 minutes. Test chart will be furnished with final report.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Lori Brown TITLE Production Supervisor DATE 5/1/90

TYPE OR PRINT NAME Lori Brown TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Orig. Signed by
Paul Kautz
Geologist

MAY 4 1990

RECEIVED

MAY - 8 1990

**OCB
MOBBS OFFICE**