

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

WELL API NO.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

K-3935

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 ☒

GAS WELL ☐

OTHER ☐

2. Name of Operator

Murphy Operating Corporation

3. Address of Operator

P. O. Drawer 2648, Roswell, New Mexico 88202-2648

7. Lease Name or Unit Agreement Name

Haley Chaveroo San Andres Unit
Sec. 33

8. Well No.

11

9. Pool name or Wildcat

Chaveroo San Andres

4. Well Location

Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West 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:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

Propose to clean out well if necessary and to perforate additional San Andres P-2 zone.

Will acidize well with approximately 3500 gals of 15% NeFe and return to production.

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 8/21/90

TYPE OR PRINT NAME Lori Brown

TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

AUG 27 1990