District Office	·····	Verber 7-1-02		
P.O. Box 1980, Hobbs, NM 88240 P.O. Box 208	F.O. BOX 2088			
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico	87504-2088	5. Indicate Type of Lease STATE FEE		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		6. State Oil & Gas Lease No. K-3935		
SUNDRY NOTICES AND REPORTS ON WEL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN DIFFERENT RESERVOIR. USE "APPLICATION FOR PEL (FORM C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name		
1. Type of Well: OL WELL OH OTHER		Haley Chaveroo San Andres Unit $\mathcal{S}_{\mathcal{C}}$		
2 Name of Operator Murphy Operating Corporation		8. Well No. 4		
3. Address of Operator P. O. Drawer 2648, Roswell, New Mexico 88202-2648		9. Pool name or Wildcat Chaveroo San Andres		
4. Well Location Unit Letter : 660 Feet From The North	Line and66	0 West		
Section 33 Township 7 South Ra		NMPM Roosevelt County		
10. Elevation (Show whether	DF, RKB, KT, GR, etc.)			
11. Check Appropriate Box to Indicate I NOTICE OF INTENTION TO:		eport, or Other Data SEQUENT REPORT OF:		
	REMEDIAL WORK	REMEDIAL WORK		
TEMPORARILY ABANDON CHANGE PLANS		G OPNS. DPLUG AND ABANDONMENT		
PULL OR ALTER CASING	CASING TEST AND C	EMENT JOB		
OTHER: Convert to injection well X	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.

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 fuild and test tubing-casing annulus to 300 psig for 30 minutes. Test chart will be furnished with final report.

SIGNATURE	Jean/	TITLE	Production Supervisor	DATE	5/1/90
TYPE OR PRINT NAME LOTI Brown			······································	TELEPHONE NO.	
(This space for State Use)	Orig. Signed by Paul Kautz Geologist			MA	Y = 4 199
APPROVED BY		TITLE		DATE	
CONDITIONS OF APPROVAL, IF ANY:			•		