

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 ☒ FEE ☐

6. State Oil & Gas Lease No.

K-3935

7. Lease Name or Unit Agreement Name

Haley Chaveroo San Andres  
Unit Sec. 34

8. Well No.

9. Pool name or Wildcat

Chaveroo San Andres

## 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

4. Well Location

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

Section 34

Township 7 South

Range 33 West

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.

1-7-91 TOH rods, pump and tubing. TIH and set cement retainer @ 4129'. Squeeze  
thru perforations with 500 sacks class C. Drillout cement and reperforate (1JSPF)  
1-9-91 at 4277', 4283', 4297', 4304' and 4316'. Acidize with 3000 gals 15% Ne  
pentol.

Avg. rate 1 BPM

Avg. pressure 730 psig

Max rate 1.1 BPM

Max pressure 1020 psig

Return well 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 5-6-91

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: