to Appropriate District Office	Energy, Minerals and Natural Re	esources Department	Revised 1-1-89		
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO. 30-041-10494		
DISTRICT II P.O. Drawer DD, Arlesia, NM 88210 Santa Fe, New Mexico		87504-2088	5. Indicate Type of Lease STATE X FEE		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No. 0G-1191				
SUNDRY NOT (DO NOT USE THIS FORM FOR PR DIFFERENT RESE (FORM (7. Lease Name or Unit Agreement Name				
1. Type of Well: OIL OAS WELL OTHER			Jennifer Chaveroo San Andres Uni Sec. 35		
2. Name of Operator Murphy Operating Corporation			8. Well No. 14		
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 <u>N</u> : <u>6</u>	60_Feet From The South	Line and1980	0 Feet From The West Line		
Section 35	Township 7 South Ra		NMPMRoosevelt County		
	10. Elevation (Show whether	UF, KKB, KI, UK, EC.)			
	Appropriate Box to Indicate	•	•		
NOTICE OF INTENTION TO: SUI			SEQUENT REPORT OF:		
	PLUG AND ABANDON	REMEDIAL WORK			
	CHANGE PLANS	COMMENCE DRILLING OPNS.			
PULL OR ALTER CASING		CASING TEST AND CE			
отнея: Convert to inj	ection 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-9007 dated September 6, 1989 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.

I hereby certify that the information ab	over's pole and complete to the best of my kno			DATE	5/1/90	
TYPE OR PRINT NAME LOTI Brown					TELEPHONE NO.	
(This space for State 1Jse)	Orig. Signed by Paul Kautz Geologist			MAY	4 1990	
APPROVED BY		TITLE -		DATE		
CONTRACTOR AND CONTACT OF ANY			•			

CONDITIONS OF AFFF OVAL, IF ANY:

OCD MOSBS OFFICE

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MAY 3 1990

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