

N. M. OIL CONS. COMMISSION
UNITED STATES P. O. BOX 1030
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
NEW MEXICO 88240

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-0139989

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Todd Lower San Andres Unit

8. FARM OR LEASE NAME

Todd Lower San Andres Unit
Section 30

9. WELL NO.

13

10. FIELD AND POOL, OR WILDCAT

Todd Lower San Andres Assoc.

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 30, T-7S, R-36E

12. COUNTY OR PARISH

Roosevelt

13. STATE

New Mexico

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

MURPHY OPERATING CORPORATION

3. ADDRESS OF OPERATOR

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

Unit Ltr. M, 660' FSL, 610.5' FWL, Sec. 30, T-7S, R-36E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4151' G.R.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) shut-in well

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

The subject well has been shut-in. The status of this well changed from producing to shut-in.

18. I hereby certify that the foregoing is true and correct

SIGNED

Lois N. Brown

TITLE Production Clerk

DATE August 4, 1987

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

ACCEPTED FOR RECORD
PETER W. CHESTER
DATE

AUG 7 1987

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA