

UNITED STATES N. M. LAND COMMISSION  
DEPARTMENT OF THE INTERIOR BOX 1980  
BUREAU OF LAND MANAGEMENT HOBBS, NEW MEXICO 88240

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-0139989A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Todd Lower S/A Unit

8. FARM OR LEASE NAME

Todd Lower S/A Unit Sec. 30

9. WELL NO.

12

10. FIELD AND POOL, OR WILDCAT

Todd Lower S/A Assoc.

11. SEC., T., E., N., OR BLK. AND  
SURVEY OR AREA

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

12. COUNTY OR PARISH

Roosevelt

13. STATE

New Mexico

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—" for such proposals.)

1.

OIL WELL ☐ GAS WELL ☐ OTHER ☒ Injection Well

2. NAME OF OPERATOR

MURPHY OPERATING CORPORATION

3. ADDRESS OF OPERATOR

P. O. Drawer 2648, Roswell, NM 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. L, 611.3' FWL & 1980' FSL, Sec. 30, T-7S, R-36E

14. PERMIT NO.

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

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 COMPLETION ☐

ABANDON\* ☐

CHANGE PLANS ☐

convert to injection well ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other)

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.)\*

Authorization granted by OCD Order No. WFX-571 dated May 26, 1988 to inject water into the subject well through ceramic-lined tubing set in a packer located within 100' of the uppermost perforation through the gross perforated interval from approximately 4200' to 4350' for the purpose of secondary recovery.

I hereby certify that the foregoing is true and correct

SIGNED

Melinda K. Hickman  
Melinda K. Hickman

TITLE Production Supervisor

DATE 6/8/88

This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

SUBJECT TO LIKE  
APPROVAL BY STATE

\*See Instructions on Reverse Side

APPROVED  
PETER W. CHESTER

JUN 15 1988

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA