(June 1990) DEPARTME		N. M. UIL CONS. CUMMISSION ITED STATES P. O. BOX 1980 INT OF THE IN HOUSE, NM 88241 (		FURM APPROVED Budget Bureau No. 1004–0135 Expires. March 31, 1993 5 Lease Designation and Serial No. NIMO164650
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT-" for such proposals				6. If Indian, Allouce of Tribe Herne N/A
SUBMIT IN TRIPLICATE				7. If Unit of CA. Agreement Designation
1 Type of Well Oil Gas Well Well Ouber 2. Name of Operator				N/A 8. Well Name and No Jennifer Chav SA #15
Permian Resources, Inc. dba Permian Partners, Inc. 3. Address and Telephone No.				9. APT Well No. 30-041-10639
P. O. Box 590 Midland, TX 79702 915/685-0113 Cleation of Well (Fronge, Sec. T. R., M., or Survey Description) Section 18 T7S R34E 660 FSL 2150.9 FEL NMPM Unit Letter O				10. Field and Pool, or Exploratory Arca Chaveroo San Andres 11. County or Parish, State Roosevelt
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPOR				RT, OR OTHER DATA
TYPE OF SUBMISSION TYPE OF ACTION				
Notice of Intent Subsequent Report Final Abandonment Notice		Abandownent Recompletion Plugging Back Casing Repair Altering Casing XXOVerTA		Change of Plans New Construction Non-Routine Freeturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log (orm.)
give subwrixe locations a Request addit was shut-in b status by mov	ing measured and one version ional time : by previous of ing in compa	d depths for all nuckers and for evaluati operator. W any pulling	ertiment dates, including estimated date of starting d zones pertiment to this work)" .on of well. This al le will return well unit, pulling rods, id begin pumping.	to producing
	APP PETER . APR	ROVED CASSTER 8 1997		REDEIVED
	BUREAU OF LA	NP MANAGEMENT	APPROVED FOR 2 MONT	H PERIOD

Tide 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or sgency of the United States any false. Fictutious or fraudulent statements or representations as to any matter within its jurisdiction.

NAGEMEN

Tive

Title

ROSWELL RESOURCE AREA

Ad correct

omeon

12

(This space for Federal or State office use)

Approved by \_\_\_\_\_\_\_ Conditions of approval, if any:

1.1. I hereby certify

Signed

Vice President

\*See Instruction on Reverse Side

ARR -8 97

<del>54 43</del>

ROSWELL, NM

4,199

April

Date .

Date





Received and a second s