

UNITED STATES N. M. OIL & GAS COMMISSION
DEPARTMENT OF THE INTERIOR
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

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. F, 1873.3' FWL & 1980' FNL, Sec. 30, T7S, R36E

14. PERMIT NO.

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

4151.2' GR

7. UNIT AGREEMENT NAME

Todd Lower S/A Unit

8. FARM OR LEASE NAME

Todd Lower S/A Ut. Sec. 30

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

Todd Lower S/A Assoc.

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

Sec. 30, T7S, R36E

12. COUNTY OR PARISH

Roosevelt

13. STATE

New Mexico

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) convert to injection 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.)*

Conversion to injection approved by OCD Order No. WFX-571 dated May 26, 1988.

6-3-88 TIH w/4081' (130 jts.) 2-3/8" 4.7# J-55 ceramic-lined tubing and Baker AD-1
to packer. Set @ 4095' KB. Load annulus w/100 bbls. inert (packer) fluid and
6-4-88 pressure test per attached chart. Install wellhead and begin injection.

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

SIGNED

Melinda K. Hickman
Melinda K. Hickman

TITLE Production Supervisor

DATE August 24, 1988

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PETER W. CHESTER
DATE

AUG 25 1988

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side