Form 3160-5
November 1983)
Formerly 9-331)

UNITED STATES
DEPARTMENT F THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)
N. M. OIL CONS. COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240

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

5. LEASE DESIGNATION AND SERIAL NO.
NM-0139989-A

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 [x] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME
TODD LOWER SAN ANDRES UNIT

2. NAME OF OPERATOR
MURPHY OPERATING CORPORATION

8. FARM OR LEASE NAME
TODD LOWER S/A UNIT SEC. 30

3. ADDRESS OF OPERATOR
P. O. Box 2648, Roswell, New Mexico 88202-2648

9. WELL NO.
16

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface
Unit Ltr. P, 660' FSL & FEL, Sec. 30, T-7S, R-36E

10. FIELD AND POOL, OR WILDCAT
Todd Lower S/A Associated

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 30, T-7S, R-36E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4129.1' G.R.

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:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[ ]	REPAIRING WELL	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) convert well to injection well			[x]
(Other)				(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			

WFX-567

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.)*

9-8-87 RU PU. TIH to fish rods. (143 rods dn. rod parted). Unseated standing valve. TOH w/rods & layed dn. rods. Changed elev., nippled dn. WH. Rel. tbg. anchor. TOH w/tbg. & layed dn. tbg. TIH w/injection string of tbg. RD PU.

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

SIGNED Lois N. Brown TITLE Production Clerk DATE October 21, 1987
Lois N. Brown

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PETER W. CHESTER
NOV 30 1987
BUREAU OF LAND MANAGEMENT

*See Instructions on Reverse Side

E