

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N. M. GL. CONS. COMMISSION  
P. O. BOX 1980  
HOBBS, NEW MEXICO 88240

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**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

**SUBMIT IN TRIPLICATE**

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

**Okie Crude Company**

3. Address and Telephone No.

**415 Mid-Continent Tower, Tulsa, OK 74103 (918) 582-2594**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**Unit F, 1980 FNL, Section 27-T8S-R36E**

5. Lease Designation and Serial No.

**N.M. 0328425**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

**N.M. Federal 55-1**

9. API Well No.

**3004120241**

10. Field and Pool, or Exploratory Area

**Prairie South (Wolfcamp)**

11. County or Parish, State

**Roosevelt County, NM**

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other **Correct Field I.D.**  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form 1)

13. 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 Federal 55-1 was plugged back to the Prairie South (Wolfcamp) in 1989 by the previous operator.**

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

Signed Thomas M. Atkinson

Title **Thomas M. Atkinson, President**

Date **November 16, 1992**

(This space for Federal or State office use)

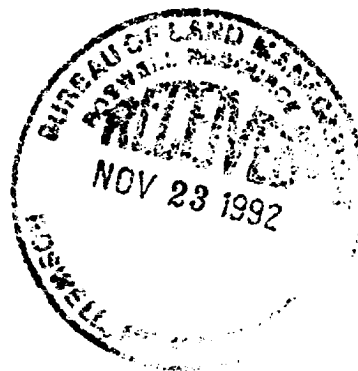
Approved by \_\_\_\_\_  
Conditions of approval, if any: \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

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

\*See Instruction on Reverse Side



RECEIVED

DEC 1 4 1992

OCD HOBBS OFFICE