

Form 1000-2
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N. M. OIL CONS. COMMISSION

P. O. BOX 1980

HOBBS, NEW MEXICO 88240

REPORT NUMBER
BASE DESIGNATION AND SERIAL

NM-02218

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

PAM

9. WELL NO.

2

10. FIELD AND POOL OR WILDCAT

E. Allison SanAndres

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

Sec. 33, T8S, R37E

12. COUNTY OR PARISH 13. STATE

Roosevelt

NM

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 ☐

2. NAME OF OPERATOR

Milford Oil Company

3. ADDRESS OF OPERATOR

c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1980' FNL & 1980' FEL of Sec. 33

14. PERMIT NO.

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

4014 GR

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 PLANT

(Other)

(Other) Set Fresh Water Tank

XX

(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.)*

Permission is hereby requested to set a 210 bbl. fresh water tank on existing well pad for fresh water storage for use in treating well for salt build up.

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

SIGNED

TITLE

Agent

DATE

7-8-87

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
PETER W. CHESTER

JUL 22 1987

BUREAU OF LAND MANAGEMENT
ROSWell RESOURCE AREA

*See Instructions on Reverse Side

RECEIVED

JUL 23 1987

CC-D
HOBBS OFFICE