

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Murphy Operating Corporation		3a. Area Code & Phone No. 505-623-7210	8. FARM OR LEASE NAME Cone Federal
3. ADDRESS OF OPERATOR P. O. Drawer 2648, Roswell, New Mexico 88202-2648		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL, 1980' FWL, Unit Ltr. C, Sec. 31, T7S, R32E		10. FIELD AND POOL, OR WILDCAT Tomahawk San Andres	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 31, T7S, R32E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4438' KB, 4428' GR		12. COUNTY OR PARISH Roosevelt	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Request for TA extension

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

Cone Federal Well # 2 is a temporarily abandoned well. We hereby request that the TA status be extended.

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

SIGNED

Lori Brown

TITLE Production Supervisor

DATE 4/27/90

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED FOR 12 MONTH PERIOD
ENDING MAY 23 1991

*See Instructions on Reverse Side

APPROVED
PETER W. CHESTER

MAY 23 1990

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA