

UNITED STATES N. M. OIL & GAS
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
P.O. BOX 1980
HOBBS, NEW MEXICO 88240

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

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> SWD		5. LEASE DESIGNATION AND SERIAL NO. NM-15019	
2. NAME OF OPERATOR MURPHY OPERATING CORPORATION		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Drawer 2648, Roswell, New Mexico 88202-2648		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit Letter P, 660' FSL, 660' FEL, Sec. 31, T7S, R32E		8. FARM OR LEASE NAME Cone Federal	
14. PERMIT NO.		9. WELL NO. 8	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4469' GL, 4481' KB		10. FIELD AND POOL, OR WILDCAT Tomahawk San Andres	
		11. SEC. T. R. M., OR BLK. AND SURVEY OR AREA Sec. 31, T7S, R32E	
		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)

REPAIRING WELL

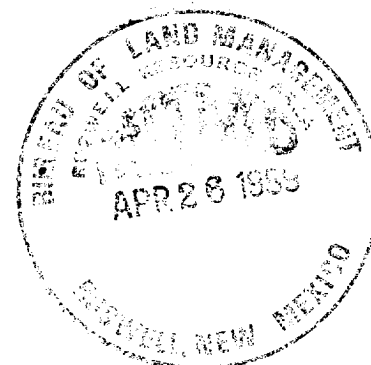
ALTERING CASING

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.)*

3-27-89 RU PU, release packer & TOH. Test tubing to 5,000 psig. Found hole in tubing. Found 1 bad joint. Lay down bad joint, pick up new packer and TIH w/AD-1 packer and tubing. Displace hole w/50 bbls. packer fluid and set packer @ 4064'. Test annulus to 300 psig for 30 min. Held.



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

SIGNED

Melinda K. Hickman
Melinda K. Hickman

TITLE Production Supervisor

DATE April 25, 1989

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

