

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

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

21M 53197

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 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

Orbit Enterprises, Inc.

3. Address and Telephone No.

P. O. Box 476 Lovington, NM 88260-0476

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

1310' FSL & 2630' FWL, Sec 28. T7S, R33E

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Farrell Federal #24

9. API Well No.

30-041-20699

10. Field and Pool, or Exploratory Area

Chaveroo San Andres

11. County or Parish, State

Roosevelt, 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 return to production  
☐ 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.)

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.)

PULL AND REPLACE ALL THAT IS NEEDED TO  
RETURN TO PRODUCTION BY AUGUST 26, 1995

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

Signed Jac. Sanderson

Title Pres.

(This space for Federal or State office use)

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

Title \_\_\_\_\_

Date \_\_\_\_\_

ACCEPTED FOR RECORD  
PETER W. CHESTER

Date JUNE 28, 1995

JUL 14 1995

BUREAU OF LAND MANAGEMENT  
NEW MEXICO  
RANGE MANAGEMENT  
WATER RESOURCES AREA

JUN 28 1995

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