

Form 3160-5
(July 1989)
(Formerly 9-331)

N. M. OIL CONSERVATION COMMISSION
P. O. BOX 1990
HOBBS, NEW MEXICO 88240
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

QUANTITY RECEIVING
OFFICE NUMBER

IRM Roswell District
Modified Form No.
NMXO-3160-4

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

Circle Ridge Production, Inc.

3a. Area Code & Phone No.

505-393-2727

3. ADDRESS OF OPERATOR

c/o Oil Reports & Gas Services, Box 755, Hobbs, NM 88241

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

660' FSL & 1980' FEL of Sec. 33

15. PERMIT NO.

15. EXPLANATIONS (Show whether DF, RT, CR, etc.)

4195 DF

5. LEASE DESIGNATION AND SERIAL NO.

NM-03927

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Drickey Queen Sand Unit

Tract 13

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Caprock Queen

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

Sec. 33, T13S, R31E

12. COUNTY OR PARISH 13. STATE

Chaves

NM

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

NOTICE OF INTENTION TO

TEST WATER SHUT-OFF

FILL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

ABANDON OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANT

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) OCD Inspection

REPAIRING WELL

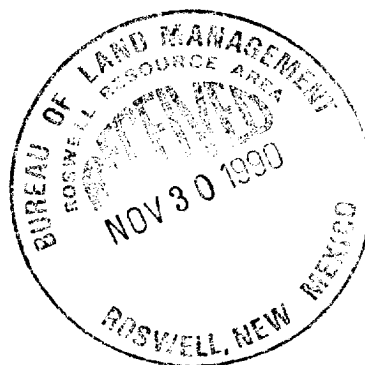
ALTERING CASING

ABANDONMENT*

X

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and 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.)

11/21/90 Dug out cellar. Oil Conservation Division representative inspected risers. Inspection O.K.



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

SIGNED

Donna Holtz

TITLE

Agent

DATE

11/27/90

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PETER J. CHESTER
DATE

DEC 7 1990

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side

Title 30 U.S.C. Section 1955. It is unlawful for any person knowingly and willfully to make to any Department, Bureau, or