

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
N. M. OIL CONSERVATION COMMISSION  
HOBBS, NEW MEXICO 88240

Form approved:  
Budget Bureau No. 10-14-0-1-2  
Expires August 31, 1985  
5. LEASE DESIGNATION AND SERIAL NO.

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 ☒ Water Injection Well  
2. NAME OF OPERATOR  
C.E. LaRue and B.N. Muncy, Jr.  
3. ADDRESS OF OPERATOR  
PO Box 470 Artesia, NM 88210  
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
2310' FWL and 1989.5' FNL  
Section 4, T14S, R31E  
Chaves County, New Mexico  
14. PERMIT NO. 15. ELEVATIONS (Show whether DE, RT, CR, etc.)  
4171' GL

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Trigg Federal  
9. WELL NO.  
23  
10. FIELD AND POOL OR WILDCAT  
Caprock Queen  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 4, T14S, R31E  
12. COUNTY OR PARISH  
Chaves  
13. STATE  
NM

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 COMPLET ☐  
ABANDON\* ☐  
CHANGE PLANE ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐  
FRACTURE TREATMENT ☐  
SHOOTING OR ACIDIZING ☐  
(Other) Shut-In ☒  
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.) \*

Well has been shut in for repairs due to mechanical difficulties as per Oil Conservation Division instructions.

API # 30-005-00988

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

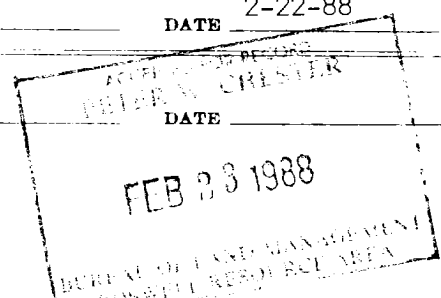
SIGNED C.E. LaRue  
(This space for Federal or State office use)

TITLE Operator

DATE 2-22-88

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE



\*See Instructions on Reverse Side