

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N. M. OIL CONS. COMMISSION
P.O. BOX 1880
HOBBS, NEW MEXICO 88240

Form approved.
Budget Bureau No. 1004-135
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. OIL WELL ☐ GAS WELL ☐ OTHER ☒ TANK BATTERY
2. NAME OF OPERATOR B+W Oil Company
3. ADDRESS OF OPERATOR R-252 N. Haldeman Rd. Artesia, N.M. 88210.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
NO1-0 330 FSL 2310 FEL

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5. LEASE DESIGNATION AND SERIAL NO. FEDERAL - N.M. - 0109848
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME FEDERAL - 21
9. WELL NO. No 1-0 /
10. FIELD AND POOL OR WILDCAT Vest RANCH Queen-Assa
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW-SE- Sec 21-14S-30E
12. COUNTY OR PARISH CHAVES
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 ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
(Other) Request To use AND VENT GAS ☒
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

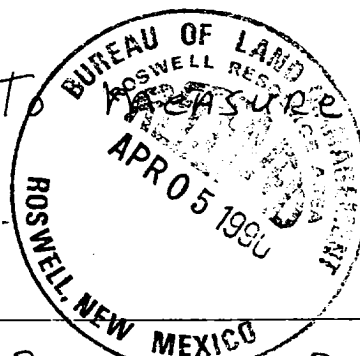
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Request for Approval To use GAS from well No 1
To operate vessels AT TANK BATTERY AND RUN
MOTOR ON well NO 1 AND VENT if ANY.

APPROX - 100 cu ft per month.

(Normally
(NO GAS VENTING)

(GAS ON well To small To PRESSURE ON
G.O.R. Test.)



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

SIGNED Billy J. Smith

TITLE OPERATOR - B+W

DATE 3-30-90

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
DATE BETE W. CHESTER

APR 18 1990

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side