

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLI  
(Other instructions  
reverse side)

Form approved.  
Bureau No. 1004-0135  
Expires August 31, 1985

SUMMARY NOTICES AND REPORTS ON WELLS

(Do not use for proposals to drill, to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR MURPHY OPERATING CORPORATION		NM-13419
3. ADDRESS OF OPERATOR P. O. Draw 2648, Roswell, New Mexico 88201		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit Ltr. G, 1980' FNL, 1980' FEL, Sec. 4, T-8S, R-31E		7. UNIT ACQUISITION NAME
14. PERMIT NO.		8. FARM OR LEASE NAME PAYE FEDERAL
15. ELEVATIONS (Specify whether DF, RT, GR, etc.) 4278.5' G.R.		9. WELL NO. 5
		10. FIELD AND POOL, OR WINDYBAY
		Tom San Ande
		11. SEC., T., R., OR BLK. AND SURVEY OR AREA Sec. 4, T-8S, R-31E
		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:		SUBSEQUENT REPORT OF:	
TEMP WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIR WELL <input type="checkbox"/>
FRAC TURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRAC TURE TREATMENT <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDON WELL* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	
(Other) change status from SI to Prod <input checked="" type="checkbox"/>		(NOTE: Report results of multiple completions, Completion or Recompletion Report and In-	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated completion dates, if pertinent to this work).\*

The subject well is now producing. The status of this well was shut-in and is now changed to producing.

I hereby certify that the foregoing is true and correct

SIGNED John N. Brown TITLE Production Clerk DATE July 9, 1984  
This space for Federal or State office use

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side