MM OIL CONS. COMMISSION
Drawer DD

Form 3160-5 November 1983) Formerly 9-331)  DEPARTMENT OF THE INTERIOR (Other instructions on BUREAU OF LAND MANAGEMENT			Form approved, Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND BERIAL NO. NM-15678
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.) PECELVED BY			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL CAB OTHER		RECEIVED BY	UNIT AGREEMENT MANE
2. NAME OF OPERATOR MIDDUY ODEDATING CORDODATION		FEB 27 1986	. FARM OR LEASE NAME
MURPHY OPERATING CORPORATION  3. ADDRESS OF OPERATOR		O. C. D.	INGRAM FEDERAL
P. O. Drawer 2648, Roswell, New Mexico 88201		ARTESIA, OFFICE	. WBLL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)			#14 10. FIELD AND POOL, OR WILDCAT
At surface			Tom-Tom San Andres
1655' FNL, 1655' FWL, Sec. 5, T-8S, R-31E, Unit Ltr. F			11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA
14. PERMIT NO.			SENW Sec. 5, T-8S, R-31E
	15. ELEVATIONS (Show whether DF, R 4242 GL, 4253 KE		12. COUNTY OR PARISH 13. STATE
10	<del></del>	<del></del>	Chaves New Mexico
16. Check A	ppropriate Box To Indicate Na	ture of Notice, Report, or C	other Data
NOTICE OF INTENTION TO			BHT REPORT OF:
TEST WATER BHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	PRACTURE TREATMENT	ALTERING CASING
SHOOT OF ACIDIZE	ABANDON*	BEOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other)	of multiple completion on Well
(Other) request for TA	PATTONE (Cleanly state all and	Completion of Recompl	etton Report and Log form.) Including estimated date of starting any I depths for all markers and zones perti-
The Ingram Federal Well We hereby request that t	#14 is a temporarily a the TA status for this	bandoned well. Work well be continued fo	cover plans are in progress or six months.
10 1 hereby certify that the foregoing is	true and correct		
SIGNED Low 71.	Drown TITLE P	roduction Records	0-4-1 0 100-
Lois N. Brown		roduction Records	DATE October 9, 1985
"This space for Federal or State offic	e use)	· ·	TOROVED
APPROVED BY CONDITIONS OF APPROVAL, IF A	PODOVED FOR TITLE MONTH	PERIOD PET	PPROVED R WPETHESTER

\*See Instructions on Reverse Side

MAR 3 1986
HOSES OFFICE

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