

DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

30-day INSTRUCTIONS  
(Other instructions apply  
verse side)

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-18501

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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

Happy Oil Company

3. ADDRESS OF OPERATOR

P. O. Drawer W, Artesia, NM 88211-7522

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

990' FNL 990' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, ST, GK, etc.)

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Walters "B" Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

SE Chaves Queen Gas Area Addoc.

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

Sec. 34 T13S R30E

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:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANE

(Other)

(Other) H2<sup>S</sup> Content

(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 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.)\*

H2<sup>S</sup> Content 2 P.P.M.

RECEIVED

FEB 7 8 33 AM '92

BUREAU OF LAND MANAGEMENT  
ROSENBERG AREA

I hereby certify that the foregoing is true and correct

SIGNED

TITLE Production Clerk

DATE 2/5/92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side