

CKH-Holbs

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NMNM94189
2. Name of Operator SOUTHWEST ROYALTIES, INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. BOX 11390; MIDLAND, TEXAS	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SE, NW, SEC 34, T17S, R33E 2310/N + 1650/W (F)	8. Well Name and No. WYATT PHILLIPS 7
	9. API Well No. 30 025 01397
	10. Field and Pool, or Exploratory Area CORBIN (QUEEN)
	11. County or Parish, State LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other TA REQUEST
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

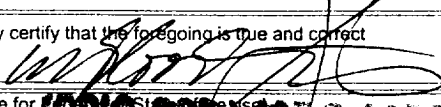
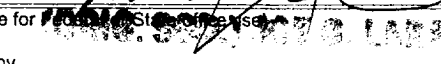
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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 TA STATUS.

1. TOH W/PRODUCTION EQUIPMENT.
2. SET CIBP @ + 3,750'. (PROD. INTERVAL 3,792-3,830')
3. LOAD CSG W/TREATED WTR.
4. PRESSURE TEST CSG TO 500 PSIG.

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

Signed 	Title AREA SUPERVISOR	Date 01/15/01
(This space for Signature of State Engineer)		
Approved by 	Title State Engineer	Date 1/31/2001
Conditions of approval, if any:		

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GWW

*See Instruction on Reverse Side