

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-3115
Expires September 30 1990

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
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
Damson Oil Corporation

3. Address and Telephone No.

3300 N. A. Bldg. 8, Suite 100, Midland, Texas 79705 915-686-6117

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2260' FWL & 2210' FNL, Sec. 29, T19S, R32E

5. Lease Designation and Serial No.

NMLC063586

6. If Indian, Allottee or Tribe Name

7. If Unit or C.A. Agreement Designation

8. Well Name and No.

So. Calif. Fed. #7

9. API Well No.

30025303280051

10. Field and Pool, or Exploratory Area

West Lusk Delaware

11. County or Parish, State

Lea Cty, N.M.

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

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection

Install Bridge Plug

(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.)

10/1/90 Set Retrievable Bridge Plug @ 6,550' to isolate
Lower Delaware Sand perforations.

CARLETON
AREA HEADQUARTERS

OCT 9 9 37 AM '90

RECEIVED

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

Signed Donald R. Crang

Title District Engineer

Date 10/5/90

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date 10-15-90