

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION
P.O. BOX 30
HOBBS, NEW MEXICO 88240

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

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Southwest Royalties, Inc.

3. Address and Telephone No.

P.O. Box 11390, Midland, Texas 79702 (915) 686-9927

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

660' FNL & ~~900'~~ 990' FWL Sec. 34, T-17-S, R-33-E

5. Lease Designation and Serial No.

NM - 801

6. If Indian, Allottee or Tribe Name

N/A

7. If Unit or CA, Agreement Designation

N/A

8. Well Name and No.

Wyatt Phillips Federal

9. API Well No. #15

30-025-32417

10. Field and Pool, or Exploratory Area

Maljamar

11. County or Parish, State

Lea County, 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 Set 5-1/2" Casing

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

3-15-94: Set 4884', 5-1/2", 17 #, J-55 casing w/350 sx PP, cement w/2% gel, 10 PPS micro bond, 5 PPS salt, .4% Halad 344.

Pressured to 600 #, Held Okay. WOC - 12 hours.

RECEIVED
MAR 21 8 10 AM '94
OIL AND GAS
ADMINISTRATIVE

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

Signed [Signature]

Title Regulatory Agent

Date 3-18-94

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____