Form 3160-5
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
14-08-001-8638A

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 Water Injection Well

7. UNIT AGREEMENT NAME
Tract #1

2. NAME OF OPERATOR
C.E. LaRue and B.N. Muncy, Jr.

8. FARM OR LEASE NAME
Pearsall Queen Sand Unit

3. ADDRESS OF OPERATOR
PO Box 470 Artesia, NM 88210

9. WELL NO.
2

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface 1980' FNL and 1980' FEL
Section 5, T18S, R32E
Lea County, NM

10. FIELD AND POOL, OR WILDCAT
Pearsall Queen

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 5, T18S, R32E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3859' GL

12. COUNTY OR PARISH
Lea

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 COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) Shut in ☐	
(Other) ☐		(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 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.)*

Well has been shut in for repairs due to mechanical difficulties as per Oil Conservation Division instructions.

API # 30-025-00848

RECEIVED
FEB 24 12 03 PM '88
CARLSBAD, NEW MEXICO
AREA OFFICE

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

SIGNED C.E. LaRue TITLE Operator DATE 2-22-88

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Subject to
Like Approval
by State

*See Instructions on Reverse Side

SJS

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