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

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 Wells

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

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface 2310' FSL and ~~2310~~ 2328' FWL
Section 5, T18S, R32E
Lea County, NM

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

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Tract #2A

8. FARM OR LEASE NAME
Pearsall Queen Sand Unit

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
Pearsall Queen

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

12. COUNTY OR PARISH: Lea | 13. STATE: NM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3850' FL

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 # 30-025-00850

RECEIVED
FEB 24 12 43 PM '88
CARLSBAD RESOURCE AREA NEW MEXICO

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

SDS

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.