,			P.O. BO: 98	5. COMMI5519/157 9 D MEXICO 88240	• 6 • 99
Form 3160-5 (June 1990)	UNITED ST DEPARTMENT OF T BUREAU OF LAND	THE INTERIOR	RECEIN Aug 29 1 22	FORM APPROVED Budget Bureau No. 1004 Expires: March 31, 19 5. Lease Designation and Serial	-0135 93
Do not use this for	SUNDRY NOTICES AND F m for proposals to drill or to e "APPLICATION FOR PERM	deepen or reentry to a	differentOreservoir.	6. If Indian, Allottee or Tribe N GMT.	Name
	SUBMIT IN TR	IPLICATE		7. If Unit or CA, Agreement D	esignation
1. Type of Well [X] Oil Gas [Well Well Other 2. Name of Operator				8. Well Name and No.	
Manzano Oil Corporation				Jewett Federal #1 9. API Well No.	
3. Address and Telephone No. P.O. Box 2107, Roswell, NM 88202-2107				<u>30-025-23661</u>	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				10. Field and Pool, or Exploratory Area ware Wast	
660'FSL & 660'FEL Sec 15, T18S, R32E				11. County or Parish, State	
12. CHECK A	PPROPRIATE BOX(s) TO I	NDICATE NATURE OF	NOTICE REPOR	Lea County, NM	
TYPE OF SUBMISSION TYPE OF ACTION					<u></u>
Notice of I	ntent	Abandonment		Change of Plans	
		Recompletion		New Construction	
Subsequent	Report	Plugging Back Casing Repair		Non-Routine Fracturing Water Shut-Off	
Final Aban	donment Notice	Altering Casing	to INC ASC-	Conversion to Injection	
13 Describe Proposed on Comme		156-94	-	(Note: Report results of multiple comp Completion or Recompletion Report a	nd Log form)
give subsurface location	leted Operations (Clearly state all pertinent dons and measured and true vertical depths fo	r all markers and zones pertinent to	this work.)*	any proposed work. If well is direction	onally drilled,
Response to INC #ASC-156-94					1 •
1. Delaware from perforations 6290-6310'.					2 2 2
2. 400 bbls per day. 3. See attached.				and a Solit A	
4. 1000 bbl steel tank.					49 ⁴⁴⁷
5. Centrifugal pump.					(1)
 A. Mewbourne Oil Company B. Querecho Plains Bone Springs Unit. 				$\epsilon_{\rm s}$	
C. Water Injection Well for Secondary (Waterflood) Recovery.					
D. NESW Se 7. A copy of t	ec 23, T18S, R32E. (S the Underground Inject rict Office.	ee attached for u	nit area.)	23 is on file with	the
14. I hereby certify that the fore Signed Allwon	Num 1	TitleEngineering To	echnician	DateAugust 26,	1994
(This space for Federal or St	•				
Approved by <u>Orig. Signed by Adam Salemen</u> Conditions of approval, if any: - SEE STIPS. —				Date 0 (12 /9L	(
	kes it a crime for any person knowingly an	d willfully to make to any departme	nt or agency of the United St	ates any false, fictitious or fraudulen	t statements
		e Instruction on Reverse S			

v operatingen vårstådet – 1