

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other instruction
reverse side)

Budget Bureau No. 1004-0-1
Expires August 31, 1985
7. LEASE DESIGNATION AND SERIAL

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

2. NAME OF OPERATOR
Oryx Energy Company

3. ADDRESS OF OPERATOR
P. O. Box 1861, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
C, 920' & 1980' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3627.9 GR

NM 53992

9. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Sun Bright Federal Com

9. WELL NO.
1

10. FIELD AND POOL OR WILDCAT
Gem-Morrow (Gas)

11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA
Sec. 21, T-19-S, R-33-E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

(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.)*

1. MIRU SCHLUMBERGER. INSTALL 5000 PSI WP LUBRICATOR. PERF MIDDLE MORROW SET I 13130-50, 13185-191, 13240-244 & 13293-308, 8 SPF, TOTAL 330 HOLES USING 2-1/8", SEMI-EXPENDABLE, ENER-JET, 13.5 GM, .34" EH, 10.25" TTP, THROUGH-TUBING GUN VIA SCHLUMBERGER GR/CNL/CCL DATED 5/6/85. RD LUBRICATOR. RD SCHLUMBERGER.

RECEIVED

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

SIGNED Maria F. Puz
(This space for Federal or State office use)

TITLE Accountant
915-688-0375

DATE 6-27-89

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

FOR:
TITLE

DATE 7-5-89

*See Instructions on Reverse Side