

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NEW MEXICO OIL CONSERVATION DIVISION  
P.O. BOX 1980  
ALBUQUERQUE, NEW MEXICO 87101-0980

FORM 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

Strata Production Company

3. Address and Telephone No.

P. O. Box 1030, Roswell, New Mexico 88202-1030 505-622-1127

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

1700' FNL & 990' FWL

Section 22-22S-32E

5. Lease Designation and Serial No.

NM-77058

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Cercion Federal #8

9. API Well No.

30-0225-32137

10. Field and Pool, or Exploratory Area East  
Livingston Ridge Delaware

11. County or Parish, State

Lea County, New Mexico

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 Change Well Number

- ☐ 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.)\*

Pursuant to requirement by the New Mexico Oil Conservation Division, Strata Production Company requests approval to change the well number from #7-Y to Cercion Federal #8.

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

Signed Carol J. Sarcis

Title Production Supervisor

Date 7/21/93

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title Patricia M. Fennell

Date