

API Well No. **30-025-08299-00-00** Owner **QUAY VALLEY INC.** County **Lea**
Well Name **NORTH EL MAR UNIT** Number **010** Inspect No. **ISAD0121941687**
Well Type **Injection - (All Types)** Well Status **Active**
UL-S-T-R **F - 26 - 26S - 32E** Facility/Project **NA**

Purpose	Violation? ☐ SNC? ☐	Well Idle >1 Year? ☐	Current Type: 1	Status: A	Type	Status
Type	P H O T O	N o t e s	Change ONGARD to...			
MIT Witnessed - Pressure Test			Respondant			
Notification Type			A-OK. All Equipment and Location in Good Shape.			
Date Performed 08/15/2001	Compliance					
Date NOV						
Date RmdyReq						
Date Extension						
Date Passed						

Failed Items

Comply# **IncidentNo** **Inspector** **Johnny Robinson** **Duration**