

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION  
P. BOX 1980  
HOBBS, NEW MEXICO 88240

RECEIVED

MAY 9 1 39 PM '94

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 well or reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

HAL J. RASMUSSEN OPERATING, INC.

3. Address and Telephone No.

310 W. WALL SUITE 906 MIDLAND, TX 79701 (915) 687-1664

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

UNIT L 1650' FSL & 990' FWL

Sec. 18-T26S-R37E

5. Lease Designation and Serial No.

LC-030180-A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

FARNSWORTH A-6

9. API Well No.

30-025-11998

10. Field and Pool, or Exploratory Area

SCARBOROUGH /ATES 7 RIVERS

11. County or Parish, State

LEA, NM

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 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.)\*

PLACE WELL BACK ON PRODUCTION.

THE WELL ALREADY HAS A SUBMERSIBLE PUMP

IN THE HOLE.

RECEIVED  
JUL 12 7 05 AM '94

Adm  
13 NOV

TYSON L. DUNN

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

Signed

Title

PRODUCTION ENGINEER

Date

3/24/94

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: