

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

HARVEY J. RASMUSSEN OPERATING

3. Address and Telephone No.

310 W. WALL # 901 MIDLAND, TX 79701 9156871664

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

NE 1/4 NW 1/4 SEC 30
T 26 S R 31 E

5. Lease Designation and Serial No.

MML 030168A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

EAVES A #12

9. API Well No. 30-025-1207
3002532274

10. Field and Pool, or Exploratory Area

YATES - 7-RIVERS

11. County or Parish, State

LEA CO. N.M.

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

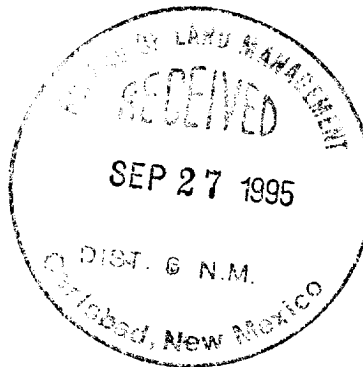
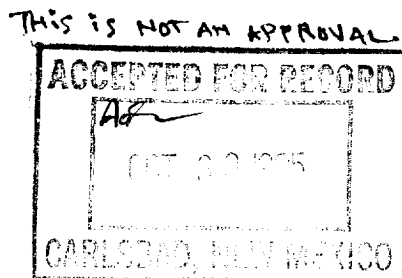
TYPE OF ACTION

- ☐ 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.)*

HAVE APPLIED FOR SALT WATER DISPOSAL
WILL CONVERT TO SW INJECTION WELL



SEP 22 11 37 AM '95
BUREAU OF LAND MANAGEMENT
CARLSBAD, NM

RECEIVED

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

Signed

HJR

Title

AGENT HJR OPERATING

Date

9/19/95

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: