

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 Injection

2. Name of Operator
SOUTHWEST ROYALTIES, INC.

3. Address and Telephone No.
PO BOX 11390; MIDLAND, TX 79702

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec. 30 T26S, R37E, 660 FNL & 1990 FWL UNIT C.

5. Lease Designation and Serial No.
LC 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 12079

10. Field and Pool, or Exploratory Area
SCARBOROUGH YATES7R

11. County or Parish, State
LEA CO., 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

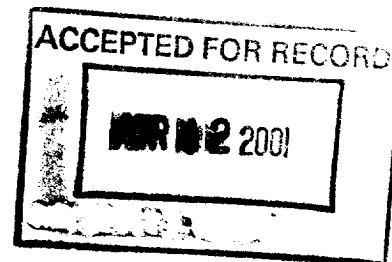
TYPE OF ACTION

☐ 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.)*

7-3-97 AT OH 3219-3341' DWN 2-3/8" TBG W/5000 GAL 15% NEFE ACID - 3000# ROCK SALT.
7-7-97 DRL 4-1/8" OH TO APPROX. 3341'.
7-8-97 AT OH @ 3219-3341' W/3000 GALS 15% NEFE ACID + 1000# RS.
7-10-97 TIH W/BAKER AD-1 PKR ON 3-1/2" INJ TBG & SET @ 2,985'.
7-11-97 WELL PRESENTLY ACTIVE INJECTION WELL.



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

Signed Title AREA SUPERVISOR

Date 03/23/01

Approved by
Conditions of approval, if any:

Title

Date

(HIG. SGD.) GARY GOURLEY

RECEIVED
2001 MAR 26 AM 8:39
SUPERIOR ISLAND MGMT
POSTOFFICE