

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil & Gas Division
P.O. Box 188
Hobbs, NM 88241

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
LC0301480

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

FARNSWORTH A FEDERAL #12

9. API Well No.

30 025 26181

10. Field and Pool, or Exploratory Area

SCARBOROUGH YATES 7 RIVERS

11. County or Parish, State

LEA COUNTY, NM

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

SOUTHWEST ROYALTIES, INC.

3. Address and Telephone No.

P.O. BOX 11390 MIDLAND, TEXAS 79702 1-800-433-7945

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

SEC. 18 T26S R37E 890 FNL & 890 FWL

D

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 TA STATUS
☐ 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.)*

REQUEST TA STATUS ON THE ABOVE WELL.

JUSTIFICATION : THE WELLBORE HAS WORKOVER POTENTIAL. FUTURE PERFS 2586'-2650' OA). SOUTHWEST PLANS TO BEGIN WORK ON THIS WELL WITHIN THE YEAR.

5-29-97 SET CIBP @ 2687'. RAN CIT. COPY OF CHART ATTACHED.

**APPROVED FOR _____ MONTH PERIOD,
ENDING _____**

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

Signed

Title ENGINEER

Date 02/26/99

(This space for Federal or State office use)

Approved by ORIG. SGD. GARY GOURLEY

Title PETROLEUM ENGINEER

Date

MAR 05 1999