

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLY
(Other instructions
reverse side)

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Form approved 50105-716 1K
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> WIW		5. LEASE DESIGNATION AND SERIAL NO. LC 064118
2. NAME OF OPERATOR Plains Petroleum Operating Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 415 W. Wall, Suite 1000, Midland, Texas 79701		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit H, 1420' FNL & 20' FEL		8. FARM OR LEASE NAME Eva E. Blinbry
14. PERMIT NO.		9. WELL NO. 19
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3256'		10. FIELD AND POOL, OR WILDCAT League (7RVS ON) GA
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 34, T23S, R37E
		12. COUNTY OR PARISH Lea
		13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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☐
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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

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☐
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FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

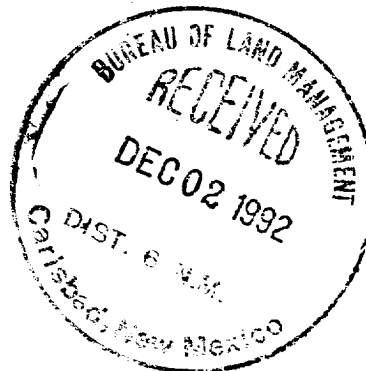
ABANDONMENT*

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. 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.)*

Please find attached a Water Injection Well Pressure Casing Test. The attached is a copy, deemed acceptable by Bonnie Pritchard this date.



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

SIGNED

Shark a. Shukerdy

TITLE

Petroleum Engineer

DATE

12-1-92

(This space for Federal or State official use)

APPROVED BY

David R. Glass

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

*See Instructions on Reverse Side

