

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

Water Disposal Well

2. Name of Operator

Midland Operating, Inc.

3. Address and Telephone No.

3300 North "A", 2-104, Midland, Texas 79705 915-570-0077

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

2310' FNL & 2310' FEL, Unit Letter G, Sec. 12, T 25 S, R 36 E

5. Lease Designation and Serial No.
NMLC032582A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
EJ Wells No. 2

9. API Well No.
30-025-09736

10. Field and Pool or Exploratory Area
Jalmat/Tish/Vis, 7 Rvrs pro Gas

11. County or Parish, State
Lea County, 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

** MIT Test

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other MIT TEST

- ☐ 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.)*

5-17-2000 MIRUPU, Pull tubing and packer, redress packer, and c/o one joint of tubing, TIF hole with packer
circ packer fluid and set packer.

5-18-2000 Pressure up on casing to 480 psi for 30 minutes, held OK.

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

Signed [Signature] Title President Date 5/26/00

(This space for Federal or State use)

Approved by _____ Title _____ Date 5/26/2000

Conditions of approval, if any:

