

(JUNE 1990)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
N.M. Oil & Gas Division  
1625 N. French Dr.  
Hobbs, NM 88240

FORM APPROVED

Budget Bureau No. 1004-0135

Expires March 31, 1993

5. Lease Designation and Serial No.

NMNM93034

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

WESTATES FEDERAL #7

9. API Well No.

30-025-11392

10. Field and Pool, or Exploratory Area

SWD: BLINNEY-FUSSELMAN  
JUSTIS FUSSELMAN, N.

11. County or Parish, State

LEA CO., NEW MEXICO

## SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals of drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT --" FOR PROPOSALS

## SUBMIT IN TRIPLICATE

## 1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other SALT WATER DISPOSAL

## 2. Name of Operator

FULFER OIL &amp; CATTLE CO., LLC

## 3. Address and Telephone No.

c/o OIL REPORTS &amp; GAS SERVICES, INC. 1008 W. BROADWAY, HOBBS, NM 88240 505/393-2727

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

97209

530' FNL &amp; 330' FWL, SEC. 1, T25S, R37E

## 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other CONVERT TO SWD
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

**SUBJECT TO  
LIKE APPROVAL  
BY STATE**

(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.)

CONVERSION FROM PRODUCING WELL TO SWD: OCD ADMINISTRATIVE ORDER SWD-829

non-well PO# 2832197  
RU PU, UNHUNG WELL. TOH W/175 RODS, RODS PARTED 3/4 BODY BREAK. NU BOP,  
TOH W/145 JTS OF 2 3/8 TBG, FOUND ROD PART. TOH W/107 RODS & RHBC. TOH W/84 1 1/2" x 2 3/8" x 7" TAC 10 JTS 2 3/8", SN, 4' PERF SUB, MUD ANCHOR.

CHANGED RAMS IN BOP FROM 2 3/8" TO 3 1/2". TIH WPKR & 179 JTS 3 1/2" EUE 3RD IAC  
9.3 TBG. REMOVE BOP, SET PKR, FLANGED UP WELLHEAD, LOAD CSG W/34 BBLs 2% KCL,  
PSI TO 500#-HELD OK. RELEASED PKR, PUMPED 50 BBL PKR FLUID. NO CIRCULATION.  
RESET PKR, FLANGED UP WELL, LOADED CSG W/34 BBLs PKR FLUID, PSI TO 500# CSG-HELD-OK.

WELL TEST WITNESSED BY OCD-GARY WINK 3/11/02.  
INJECTION STARTED 3/12/02.

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

Signed

Gary Heard

Title

AGENT

JUN 11 2002

BY

RY GOURLEY  
SENIOR ENGINEER

Date

05/22/02

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

