

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

EXPIRES AUGUST 31, 1985
5. LEASE DESIGNATION AND SERIAL NO.
LC-069052

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. OIL WELL GAS WELL OTHER Water Injection Well

2. NAME OF OPERATOR
Sirgo-Collier, Inc.

3. ADDRESS OF OPERATOR
P. O. Box 3531, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
Unit G, 1980' FNL 1650' FEL, Sec 31, T-24-S, R-38-E

14. PERMIT NO. KB 3135'

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7. UNIT AGREEMENT NAME
WDOCU

8. FARM OR LEASE NAME
Dollarhide Queen

9. WELL NO.
32

10. FIELD AND POOL, OR WILDCAT
Dollarhide Queen

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 31, T-24-S, R-38-E

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
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
Other
PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(Other) Return wells to injection in same form.

(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 and 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.) *

8-29-87 Began injecting water into well in Queen formation. Injecting water into well approximately 8 hours per day. Disposing of all produced water.

ACCEPTED FOR FILING

SEP 2 1987

SJS

LAND MANAGEMENT

SEP 10 10 49 AM '87
OFFICE OF THE DIRECTOR
BUREAU OF LAND MANAGEMENT

RECEIVED

I hereby certify that the foregoing is true and correct

SIGNED Amy L. Whitley TITLE Agent

DATE 9-2-87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY.

*See Instructions on Reverse Side