

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. 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.
QC-032579-E

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
ARCO Permian

3. Address and Telephone No.

P.O. Box 1089, Eunice, NM 88231

505-394-1649

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

Unit Letter P, 330' FSL & 990' FEL

Sec. 25-T25S-R37E

6. If Indian, Allottee or Tribe Name

SOUTH JUSTIS UNIT

NMNM87877X

8. Well Name and No.
South Justis Unit "260

9. API Well No.
30-025-22262

10. Field and Pool, or exploratory Area
Justis Blinbry Tubb Drkd

11. County or Parish, State
Lea 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

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other Pressure 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 give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

TD: 6950' PBD: 6065' CIBP: 6100' INJECTION INTERVAL: 4983-5948'

01/13/00: Pressure test to 520#, held 30 mins. OK. Chart Attached.

Pressure test conducted in accordance with NMOCD Division Order No. R-9747 to reinstate authority to inject.

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

Signed Gary W. Wink

Title Administrative Assistant

Date 01/13/00

(This space for Federal or State office use)

Approved by Gary W. Wink

Title _____

Date _____

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statement or representations as to any matter within its jurisdiction.

