

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Copy to SF
Form approved.
Budget Bureau No. 42-B1424.

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.)

RECEIVED

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Paul Slayton

3. ADDRESS OF OPERATOR
P O Box 1936 Roswell, N. Mex. 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State or Federal office. See also space 17 below.)
At surface
P-990 Ft from the South, 330 Ft. from the East.
13-17S-27E

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, GR, etc.) _____

5. LEASE DESIGNATION AND SERIAL NO.
L C 064023

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME _____

8. FARM OR LEASE NAME
Saunders

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
Empire (Y=SR)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
13-17S-27E

12. COUNTY OR PARISH
Eddy

13. STATE
N Mex

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

| | | | |
|--|---|--|--|
| NOTICE OF INTENTION TO : | | SUBSEQUENT REPORT OF : | |
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) Remedial work | |

(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.)*

10-1-76
changed the bottom hole pump and put back on production.

RECEIVED

NOV 18 1976

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED Ruby Wickstrom TITLE Clerk DATE 10-26-76

(This space for Federal or State office use)

APPROVED BY Joe S. Lara TITLE ACTING DISTRICT ENGINEER DATE NOV 18 1976

CONDITIONS OF APPROVAL, IF ANY: _____