

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-53365

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal

9. WELL NO.

4-8

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 8, T19N, R5W

12. COUNTY OR PARISH 13. STATE

McKinley

New Mex.

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 ☐

Re-Entry

2. NAME OF OPERATOR

James L. Ludwick

3. ADDRESS OF OPERATOR

P.O. Box 70  
Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State Requirements. See also space 17 below.)  
At surface

330' FSL, 330' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether BP, ST, GE, etc.)

6600 Gr.

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 ☐

(Other) Completion Attempt ☒

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(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.)\*

- 6-13-83 MIRT, Cut off dry hole marker, Drill surface plug, Drill 1000' plug.
- 6-14-83 CO to BP @1985, Unload hole.
- 6-15-83 Tested Daily Rate: 2 BOPD, 8 BWPD.
- 6-16-83 Re Perf 1 SPF 1945-59. Test Same.
- 6-17-83 Set Ret BP @1918, Pressure Test Casing to 1000#, O.K., Acidize 1945-59, 1500 gal 15% HCL.
- 6-18- & 6-19 Shut In - Entry Test.
- 6-20-83 Unload Hole - Test 2 BOPD, 20 BWPD, 20 MCF.
- 6-21-83 Shut in until offset well is drilled.

RECEIVED

JUN 28 1983

OIL CON. DIV.  
DIST. 3

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

SIGNED

*Shane C. Kennedy*

TITLE

Agent

DATE

6-22-1983

(This space for Federal or State of \_\_\_\_\_)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

JUN 27 1983

\*See Instructions on Reverse Side

NMOCC

FARMINGTON DISTRICT

BY

Smm