

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 6999
2. NAME OF OPERATOR Cities Service Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 1919 Midland, TX 79702	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650' FNL & 990' FEL of Sec. 28-T19N-R5W McKinley County, New Mexico	8. FARM OR LEASE NAME FEDERAL E
14. PERMIT NO.	9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6645' GR	10. FIELD AND POOL, OR WILDCAT Undesignated
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA H Sec 28-T19N-R5W
	12. COUNTY OR PARISH McKinley
	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)\*

T.D. 223' Shale. Prep to drill ahead. MIRU rotary and spudded a 13-3/4" hole @ 2100 MST 4/5/81 & drld to a T.D. of 223' in Shale. Ran & set 5 Jts (209.68') 9-5/8" OD 32.3#, H40 csg @ 223' & cmtd w/110 sacks Class B with 2% CaCl<sub>2</sub> cmt. Plug down @ 0345 MST 4/6/81. Cmt circulated to surface. WOC 18 Hrs.



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

SIGNED

*[Signature]*

TITLE

Region Oper. Mgr.

DATE

4/8/81

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

DATE

APR 14 1981

NMOCC

\*See Instructions on Reverse Side

FARMINGTON DISTRICT  
BY *[Signature]*