

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. <del>LC-06192</del> <i>11/11/66</i>	
2. NAME OF OPERATOR <b>Roy H. Smith Drilling Co.</b>		6. IF INDIAN, ALLOTTED OR TRIBE NAME	
3. ADDRESS OF OPERATOR <b>726 1st. Wichita National Bldg., Wichita Falls, Texas</b>		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 <b>600' from North line and 1900' from East line</b>		8. FARM OR LEASE NAME <b>Buffalo-Federal</b>	
14. PERMIT NO. <b>NM-01177-A</b>	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>3791 GL</b>	9. WELL NO. <b>1</b>	
		10. FIELD AND POOL, OR WILDCAT <b>South Carbin</b>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 34, T-18S, R-33E</b>	
		12. COUNTY OR PARISH <b>Lea</b>	13. STATE <b>New Mexico</b>

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 checked="" 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) <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.) \*

1/26/66

Drilled 7 7/8" hole to total depth 4620'. ran electric log and 4 1/2" OD 9.50# new seamless casing set at 4620'. Cemented w/200 sx Incore, 8% jel, 100 sx Incore, 4% jel. Plug down 7:30 AM 1/26/66

18. I hereby certify that the foregoing is true and correct  
SIGNED *[Signature]* TITLE WELDER DATE 2/2/66

(This space for Federal or State office use)  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: **APPROVED**

FEB 4 1966  
J. L. GORDON  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side

## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 17:** Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

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5. LEASE DESIGNATION AND SERIAL NO.

~~DE 04941~~ *North*

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

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Use "APPLICATION FOR PERMIT" for such proposals.)

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

**Buffalo-Federal**

9. WELL NO.

**1**

10. FIELD AND POOL, OR WILDCAT

**South Corbin**

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

**Sec. 34, T-186, R-33E**

12. COUNTY OR PARISH

**Lea**

13. STATE

**New Mexico**

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR

**ROY H. SMITH DRILLING CO.**

3. ADDRESS OF OPERATOR

**728 1st. Wichita National Bldg., Wichita Falls, Texas**

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

**560' from North line and 1980' from East line**

14. PERMIT NO.

**W-01177-A**

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

**3791 GL**

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)

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.)\*

**1/14/66**

**Drill 11" hole to 253' DF. Ran 32' 6 5/8" seamless casing set at 252', cemented w/80 sx. Cement circulated. Allowed cement to set 24 hrs. tested 8 5/8" w/1000# for 30 minutes. Test okay.**

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

SIGNED

TITLE

**Owner**

DATE

**2/2/66**

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

**APPROVED**

**FEB 4 1966**

**J. L. GURSON  
ACTING DISTRICT ENGINEER**

\*See Instructions on Reverse Side

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