(May 1963)

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

(Other instructions on reverse side)

Budget Bureau [illegible]

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.)

5. LEASE DESIGNATION AND SERIAL NO.: NM 0137732

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: —

1. OIL WELL ☒ GAS WELL ☐ OTHER

7. UNIT AGREEMENT NAME: —

2. NAME OF OPERATOR: Kern County Land Co.

8. FARM OR LEASE NAME: Federal 24

3. ADDRESS OF OPERATOR: 411 East State Bank, Midland, Texas

9. WELL NO.: 3

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 1980' FNL & 1980' FWL, Unit E, SE/4 NW/4

10. FIELD AND POOL, OR WILDCAT: Chaveroo San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 24-T7S-R33E [illegible]

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 4356 G.L.

12. COUNTY OR PARISH: Roosevelt 13. STATE: N.M.

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☒	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other)			
(Other)							

(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.) *

Reached T.D. 4400' on 7-31-66. Logged well. Ran 4 1/2" 9.5# J-55 casing & cemented at 4400' with 250 sx Incor salt saturated cement +8% gel and 150 sx Incor neat salt saturated. Plug down 1:30 PM, 8-1-66. Tested casing to 2000 psi for 30 minutes on 8-1-66.- Held okay.

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

SIGNED [signature] TITLE Dist. Secretary DATE 8-10-66

(This space for Federal or State office use)

APPROVED BY ______ TITLE ______ DATE ______

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

APPROVED

AUG 22 1966

J. L. GORDON

ACTING DISTRICT ENGINEER