

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate*
(Other instructions on reverse 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 Water Injection		5. LEASE DESIGNATION AND SERIAL NO. Federal NM 0108997
2. NAME OF OPERATOR Champlin Petroleum Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 701 Wilco Bldg., Midland, Texas 79701		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 660' FSL & 660' FEL, Section 30, T7S, R33E, State Unit P		8. FARM OR LEASE NAME Farrell-Federal
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4433' GR	9. WELL NO. 4
		10. FIELD AND POOL, OR WILDCAT Chaveroo (San Andres)
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30, T7S, R33E
		12. COUNTY OR PARISH Roosevelt
		13. STATE New Mexico

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) <input type="checkbox"/>	
(Other) Equip as water injection <input checked="" 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.)*

Currently, the well is shut in with San Andres perforations 4188, 4200, 4214, 4267, 4279, 4291, 4299, 4316, 4333, 4338, 4343, 4387, 4393 & 4399'. Proposal is to pull rods, pump and tubing. The well will then be completed with tubing, packer and surface connections for injecting produced water into the above San Andres perforations. Estimated date of starting work is as soon as approved or about April 1, 1976.

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

SIGNED D. C. Condie TITLE District Engineer DATE 11 March, 1976

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
MAR 29 1976
D. C. CONDIE

*See Instructions on Reverse Side