

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN REVERSE SIDE
(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.)

5. LEASE DESIGNATION AND SERIAL NO.

LC 029512 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
*Jewett McDonald
Wallen Federal*

9. WELL NO.

51

10. FIELD AND POOL, OR WILDCAT
Rivers
Teas, Yates, Seven

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

Sec 18, T 20 S, R 34

12. COUNTY OR PARISH

Lea

13. STATE
New Mexico

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Walter W. Krug DBA Wallen Production Company

3. ADDRESS OF OPERATOR
P. O. Box 1960 Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
*351' FSL and 178' FEL.
330' / S & E*

14. PERMIT NO. *present records show*

15. ELEVATIONS (Show whether DF, RT, CR, etc.)
GEOLOGICAL SURVEY
HOBBS, 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) <i>To Correct Location</i> <input checked="" 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.)*

Other *** Correction location ::: Old Cities Service location is actually as indicated by certified plat.

This is to show the corrected location of Wallen Production Company (formerly Cities Service) well No. 1 Jewett McDonald which is shown on the record as located 330 feet from the south and east lines of sec. 18. The well location has been re-surveyed and the correction location found to be 351 feet from the south line and 178 feet from the east line of sec. 18, T. 20 S., R. 34 E.

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

SIGNED *Walter W. Krug* TITLE Engineer

DATE 5-12-75

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
MAY 28 1975
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO