

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

PERMIT IN TRIP  
(either instruction  
verse side)

Form approved.  
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NYC 560808

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Antec Federal "14"

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Lea (Devonian)

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

Sec. 14, T-20-S, R-34-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

SOUTHWESTERN NATURAL GAS, INC.

3. ADDRESS OF OPERATOR

900 Building of the Southwest, Midland, Texas 79701

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

1980' FSL & 1830' FEL

14. PERMIT NO.

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

3648' 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 or 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.)\*

The Devonian Zone was tested and proved to be uneconomical to produce. We desire to temporarily abandon the Devonian Zone and complete in the Pennsylvanian Zone and test prospective zones in the Bone Springs Formation using the following procedure:

1. Set Baker Model "K" cement retainer at 14,492', Otis "10A" packer with knockout plug at 14,000'.
2. Perforate treat and test selected intervals in the Pennsylvanian.
3. Perforate, treat, and test selected intervals in the Bone Springs.

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

SIGNED Don E. Kinnick

TITLE Operations Manager

DATE 7-3-69

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

ACCEPTED FOR RECORD DATE \_\_\_\_\_

District Engineer

\*See Instructions on Reverse Side JUL 7 1969