

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPL
(Other instructions
verse side)

Form approved.
Budget Bureau No. 42-R1424.

ACCEPTED FOR RECORD

NMOCC - HOBBS

DRY NOTICES AND REPORTS ON WELLS

BLM - SANTA FE

Use "APPLICATION FOR PERMIT" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.

NM 0155494 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Winkler Federal

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Cato

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

29-T8S-R30E

12. COUNTY OR PARISH

Chaves

13. STATE

New Mexico

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
SINCLAIR OIL & GAS COMPANY

3. ADDRESS OF OPERATOR
P. O. Box 1920, Hobbs, New Mexico 88240

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

1980' fr the South line and 660' fr the East line

14. PERMIT NO.

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

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*

Spud, Run surf. csg, cement & test.

(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.)*

11-15-67 Spud 12-1/4" hole 11-30 AM, 11-15-67 and drilled surface and red bed to 282'. Ran 8-5/8"OD 20# SP-40 set @ 282' and cemented w/200 sks. Incor Class C plus 1/4# Flo Cele per. sk. & 2% Cal. Chl. Gement Circulated to surface. WOC 24 hrs.

11-16-67 Pressure tested surface casing to 800# for 30 mins. Tested O.K.

RECEIVED
NOV 21 1967
U. S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO
RECEIVED
NOV 20 1967
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

[Signature]

TITLE

Superintendent

DATE

11-17-67

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

[Signature]
District Engineer

*See Instructions on Reverse Side

Orig&4cc: USGS, Roswell, cc: Regional Office, cc: file