

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

**NM 040758**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

**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  GAS WELL  OTHER

2. NAME OF OPERATOR  
**FRANKLIN, ASTON & FAIR, INC.**

3. ADDRESS OF OPERATOR  
**P. O. Box 1090, Roswell, New Mexico 88201**

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

**660' FBEL's of Sec. 7, T. 8 S., R. 37 E., N.M.P.M.**

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
**Falmer Federal**

9. WELL NO.

**1**

10. FIELD AND POOL, OR WILDCAT

**Undesignated**

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

**Sec. 7-8S-37E, N.M.P.M.**

14. PERMIT NO.

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

**4,043.6' GR**

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:

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) **Set Casing**

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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.)\*

**On February 23, 1969 set 149 jts. 5 1/2" New J-55 14" casing to 4875' KB using 275 sacks Incon Paz cement, 2% gal, 3% salt per sack. After waiting 70 hours, pressured up on casing to 800 psi and held for 30 minutes. Cement job okay. Cementing work was done by Halliburton.**

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

SIGNED Grant M. Smith

TITLE **Geologist**

DATE **2-27-69**

(This space for Federal or State office use)

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

TITLE

**APPROVED**

\*See Instructions on Reverse Side

W. J. GORDON  
DISTRICT ENGINEER

**LTR**



UNIT STATES  
DEPARTMENT OF THE INTERIOR  
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LEASE DESIGNATION AND SERIAL NO.

**NM 040758**

**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  GAS WELL  OTHER

2. NAME OF OPERATOR  
**FRANKLIN, ASTON & FAIR, INC.**

3. ADDRESS OF OPERATOR  
**P. O. Box 1090, Roswell, New Mexico 88201**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
**660' FSL and 660' FEL of Sec. 7, T. 8 S., R. 37 E., NMPM**

5. ELEVATIONS (Show whether DF, RT, GR, etc.)  
**4,043.6 ft. GR**

6. LEASE DESIGNATION AND SERIAL NO.  
**NM 040758**

7. NET AGREEMENT NAME

8. FARM OR LEASE NAME  
**Felmont Federal**

9. WELL NO.  
**1**

10. FIELD AND POOL, OR WILDCAT  
**Undesignated**

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
**Sec. 7-8S-37E, NMPM**

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 checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <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"/>	

(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.)\*

**Well spudded at 6 P.M., February 12, 1969. Set seven joints of 8 5/8", J-55, 20# casing at 295' KB using 175 sacks cement, 2% CaCl, - circulated to surface. After waiting 18 hours, pressured up on casing to 600 psi and held 30 minutes. Cement job okay. Work done by Halliburton.**

18. I hereby certify that the foregoing is true and correct  
SIGNED [Signature] TITLE Geologist DATE February 14, 1969

(This space for Federal or State office use)  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

**APPROVED**

FEB 14 1969

\*See Instructions on Reverse Side

DISTRICT ENGINEER

## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 17:** Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.