

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIP  
(Other instruction  
reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-2842-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "20"

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Undesignated

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

Sec 20, T-13-S, R-33-E

12. COUNTY OR PARISH 13. STATE

Lea

New Mexico

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

Coastal States Gas Producing Company

3. ADDRESS OF OPERATOR

P. O. Box 235, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface1980' FNL and 660' FWL of Section 20, T-13-S, R-33-E  
1930

14. PERMIT NO.

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

4258.2' 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 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.)\*

SPUD DATE: 11-17-68

12-13-68: Ran 304 joints (as below) 5-1/2" casing set at 9915'. Cemented with 200  
sacks of Class "C" with 1:1 Posmix, .5% CFR-2, 4% gel, and 9.5# salt per  
sack. PD at 11:00 p.m. Tested with 1050#, held okay. WOC 85 hours.

## No. Joints

## Description

113	5-1/2" 15.5# 8R J-55 S&TC
40	5-1/2" 15.5# 8R J-55 LT&C
66	5-1/2" 17# 8R J-55 ST&C
33	5-1/2" 17# 8R J-55 LT&C
52	5-1/2" 17# 8R N-80 LT&C

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

SIGNED

TITLE

Div. Prod. Supt.

DATE

December 20, 1968

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

DEC 20 1968

\*See Instructions on Reverse Side

J L GORDON  
ACTING DISTRICT ENGINEER