

UNITED STATES M. O. C. S. COPY
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Wildcat		5. LEASE DESIGNATION AND SERIAL NO. NM-18970	
2. NAME OF OPERATOR Read & Stevens, Inc. ✓		6. IF INDIAN, ALLOTTEE OR TRIBE NAME -	
3. ADDRESS OF OPERATOR P. O. Box 2126, Roswell, New Mexico 88201		7. UNIT AGREEMENT NAME -	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL & 1980' FEL Sec. 19, T-6-S, R-27-E, N.M.P.M.		8. FARM OR LEASE NAME West Haystack Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3870.2' GR - 3882' RKB		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 19, T-6-S, R-27-E N.M.P.M.	
		12. COUNTY OR PARISH Chaves	
		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 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 checked="" 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"/>	
(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.)*

Verbal approval received 3-04-74, from Jim Knauf, U. S. G. S., to plug well as follows:

Fill hole with good mud
Set 10 sx. cement plug 0' - 10'
Set 35 sx. cement plug 1275' - 1375'
Set 35 sx. cement plug 3640' - 3540'
Set 35 sx. cement plug 5400' - 5500'
Set 35 sx. cement plug 5700' - 5800'
Set 35 sx. cement plug 5970' - 6070'
Install regulation marker.

RECEIVED
MAR 22 1974
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED <u>Joe Wigley</u>	TITLE <u>Agent</u>	DATE <u>March 18, 1974</u>
(This space for Federal or State office use)		

APPROVED BY <u>[Signature]</u>	TITLE _____	DATE _____
CONVENTIONS OF APPROVAL, IF ANY:		

APPROVED
APR 10 1974
R. L. BEEKING
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side