

13160-5
(September 1983)
(Formerly 9-331)

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

C/SF

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.)

WELL ☐ GAS WELL ☒ OTHER

NAME OF OPERATOR
R. N. AINSWORTH

ADDRESS OF OPERATOR
BOX 7 MILWESAND, N.M. 88125

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

723 FNL 3' 2016 FEL

PERMIT NO.

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

4059 GL

5. LEASE DESIGNATION AND SERIAL NO.

NM 45221

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

McKAMY

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

HAYSTACK Cisco

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

S-28-T6S-R27E

12. COUNTY OR PARISH

CHAVES

13. STATE

N.M.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

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.)

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.)

6/27/90
RUN 1264' X 8 5/8" X 24 API CASING

RUN 400 SACKS CEMENT, 15 SACKS CIRCULATED
to PIT



I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE [Signature]

DATE July 20, 1990

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States a false statement.

