

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TR  
(Other instructi  
verse side)CATE\*  
on re-F. n 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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Wildcat</u>		<b>RECEIVED</b>  NOV 7 1974  <b>O.C.C.</b> <b>ARTESIA, OFFICE</b>	5. LEASE DESIGNATION AND SERIAL NO. NM-2827
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  1980' FNL & 660' FSL Sec. 31, T-14-S, R-29-E, N.M.P.M.			8. FARM OR LEASE NAME Rodman Federal
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3722' GR - 3734' RKB	9. WELL NO. 1
			10. FIELD AND POOL, OR WILDCAT Wildcat
			11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 31, T-14-S, R-29-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 type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Cement intermediate csg.</u> <input checked="" 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.)\*

Drilled 11 1/4" hole from 348' to 2180'. Ran 55 joints 8 5/8", 24#, J-55 ST & C Casing, total of 2219', set @ 2180' RKB. Cemented w/200 sx. Class "H" cement w/2% CaCl<sub>2</sub>. Plug down @ 6:10 A.M., 11-1-74. WOC for 27 hours. Pressure tested casing to 1500 PSI for 30 min., held OK.

**RECEIVED**  
NOV - 6 1974  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

TITLE Agent

DATE 11-4-74

(This space for Federal or State office use)

TITLE

DATE

APPROVALS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

