

NEW MEXICO OIL CONSERVATION COMMISSION

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FEB 26 1975

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5a. Indicate Type of Lease  
 State  Fee

5. State Oil & Gas Lease No.

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT ZONE. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

**O. C. C.**  
**ARTESIA OFFICE**

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator DEPCO, Inc. ✓	8. Farm or Lease Name Derrick
3. Address of Operator 800 Central, Odessa, Texas 79761	9. Well No. 1
4. Location of Well UNIT LETTER <u>G</u> <u>1325</u> FEET FROM THE <u>North</u> LINE AND <u>1325</u> FEET FROM THE <u>East</u> LINE, SECTION <u>3</u> TOWNSHIP <u>15 S</u> RANGE <u>27 E</u> NMPM.	10. Field and Pool, or Wildcat Buffalo Valley Penn Undesignated
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Chaves

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
 NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1-29-75 DST #1 7840-7975. Detail of DST to be reported on completion report.

2-2-75 TD 8330'. Ran 307 jts. 4 1/2" 10.5# & 11.6# casing set at 8330', cemented w/300 sx. Class "C", 6# salt, 3/4# 1% CFR2. Plug down 6;15 A.M. 2-4-75. Top of cement 7200' on temperature survey. WOC.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED D. R. Mason D. R. Mason TITLE Chief Clerk DATE 2-24-75

APPROVED BY W. A. Gussert TITLE SUPERVISOR, DISTRICT II DATE FEB 27 1975

CONDITIONS OF APPROVAL, IF ANY: