

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NMOCC COPY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Copy to SF
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 checked="" type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Mountain States Petroleum Corp.		8. FARM OR LEASE NAME Brotar	
3. ADDRESS OF OPERATOR P O Box 1936 Roswell, New Mexico		9. WELL NO. No. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 958 FSL & FEL		10. FIELD AND POOL, OR WILDCAT Wildcat	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 20-15S-28E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3610 GR		12. COUNTY OR PARISH Chaves	
		13. STATE N. Mex.	

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) <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.) *

8-27-77 Drilled to TD 1820'. Drilling break 1794-1801'. Well kicked on connection.

8-29-77 Estimated 200 psig on BOP. Circ of gas. Logged well with GR-N. Ran 5-1/2" pkr, seating nipple and 2-3/8" J55 tubing set at 1626'. Swabbed off fluid from tubing and shut in for night.

8-30-77 12 hr. SITP 740. Released Rig. Well shut in for pipeline connection and subsequent 4 point testing.

RECEIVED

U.S. GEOLOGICAL SURVEY
ALBUQUERQUE, NEW MEXICO

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

SIGNED <u>[Signature]</u>	TITLE <u>Clerk</u>	DATE <u>9/2/77</u>
(This space for Federal or State office use)		
APPROVED BY <u>[Signature]</u>	TITLE <u>ACTING DISTRICT ENGINEER</u>	DATE <u>SEP 12 1977</u>
CONDITIONS OF APPROVAL, IF ANY:		