

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN THE
(Other Instructions
reverse side)TE
reForm 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 type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Betrice Bedingfield		8. FARM OR LEASE NAME Hastie Bedingfield	
3. ADDRESS OF OPERATOR 1002 West Dallas Avenue, Artesia, New Mexico		9. WELL NO. 8	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit F - SE $\frac{1}{4}$ NW $\frac{1}{4}$ of Section 18, Township 17 South, Range 28 East, N.M.P.M.		10. FIELD AND POOL, OR WILDCAT Empire Yates - Seven Rivers Pool	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3549	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18, T-17-S, R-28-E, N.M.P.M.	
		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

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U. C. C.
ARTESIA, OFFICE

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☒

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.)

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.)*

Operator has completed conversion of disposal unit for saltwater from the other wells operated by operator on said lease on the NW $\frac{1}{4}$ of section 18 into the Seven Rivers Formation. Injection is being accomplished through 2-inch fiberglass tubing installed in a packer set at 487 feet. The casing-tubing annulus was filled with an inert fluid and tested for leakage in casing, tubing, and packer. No leakage existed. The injection well is equipped with pressure limiting devices to limit wellhead pressure to no more than 275 psi.

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

SIGNED Betrice BedingfieldTITLE OwnerDATE July 24, 1978

(This space for Federal or State office use)

APPROVED BY Lee D. LaraTITLE ACTING DISTRICT ENGINEER

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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ROSWELL, NEW MEXICO