

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN / LOCATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 068628

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Donohue Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

High Lonesome

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

Sec. 15, T-16-S, R-29-E

12. COUNTY OR PARISH

Hddy

13. STATE

New Mexico

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Sun Oil Company - DX Division

3. ADDRESS OF OPERATOR

P. O. Box 1416 - Roswell, New Mexico 88201

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

2310/5 1650/W
1980 FSL & 1980 FWL

14. PERMIT NO.

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

3687 DF

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.)*

1. Pulled rods.
2. Circulated mud laden fluid.
3. Laid 25 sack plug 1850 to 1500'. WOC 12 hours.
4. Cut 5-1/2" casing at 1320' and pulled casing.
5. Spot 25 sack plug 1350' to 1200'.
6. Spot 25 sack plug 800' to 700'.
7. Put 10 sack plug in top 8-5/8" casing.
8. Set dry hole marker.
9. Cleaning up lease for inspection.
10. Will contact USGS when ready for inspection.

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

SIGNED

F. D. Labo

TITLE

District Engineer

DATE

4-30-69

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED
JUN 26 1969
H. L. BECKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side