

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THE COVERS
with the instruction
(see side)

Date of issue of
Bureau Form No. 12 (11-24)
D. LEASE NUMBER, TDS AND SURV. 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 reservoir.
Use APPLICATION FOR PERMIT for such proposals.)

L-122 (A)

B. INDIAN, ALLIANCE OR TRIBE NAME

7. UNIT ABBREVIATION NAME

8. FARM OR LEASE NAME

LEERS

9. WELL NO.

2

10. FIELD AND POSITION OF WELL

CAVE

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

SEC. 33 T 16 R 29

12. COUNTY OR PARISH 13. STATE

EDDY

N. Mex.

RECEIVED

MAR 31 1977

O. C. C.
ARTESIA OFFICE

1. OIL GAS OTHER
WELL WELL OTHER

2. NAME OF OPERATOR

JEM Resources Inc.

3. ADDRESS OF OPERATOR

Box 643 Artesia, N. Mex. 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any SURVEY OR ABCT
See also space 17 below.)
At surface

1980' From The South Line & 660' From The West
Line of SEC. 33 T 16S R 29E

14. PERMIT NO.

15. ELEVATIONS (Show whether DS, RT, CR, etc.)

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input checked="" type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<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 perti-
nent to this work.)*

8 5/8 Surface set at 352' & Circulated.
5 1/2 Casing set at 2200' with 100 sacks. No temp. survey.
Base of Queen approx. 1700' & Base of salt at 640'

Will set 25 sack plug at 2250' to 2150' & shoot pipe. If queen is open
set 35 sack plug 1700' to 1600'. Set 35 sack plug at base of salt &
35 sacks at shoe of surface. Set 10 sacks & Marker at top.
Hole will be loaded with mud laden fluid (produced water) & Cement
will be Portland Type 2.

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MAY 24 1976

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED *[Signature]*

TITLE President

DATE 5/21/76

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED BY *[Signature]*

*See Instructions on Reverse Side