

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Injection well		7. UNIT AGREEMENT NAME East Henshaw Unit Tr. 18	
2. NAME OF OPERATOR JFG Enterprise		8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR P.O. Box 100, Artesia, NM 88211-0100		9. WELL NO. 4	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 3300 feet from the South line and 1980 feet from the West line, Sec. 1, T-16S, R-30E		10. FIELD AND POOL, OR WILDCAT W. Henshaw Grayburg	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3933 GL	
		12. COUNTY OR PARISH Eddy	
		13. STATE N.M.	

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 checked="" type="checkbox"/>	(Other) Temporarily Abandon <input checked="" 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.)\*

Pulled 2" x 4 1/2" R-4 Packer - Run back 4 1/2" CI Bridge on 2" tubing and set @ 2900 ft. (Perfs 3030'-60') Circulate 60 Bbl. Packer Fluid, (2% KCL & Corr. Inhib.) Pull tubing and load casing w/balance of Packer Fluid. Pressure casing to 200#. Close well in. Rig down.  
Witnessed by Mike Williams, NMOCC.



APPROVED FOR 12 MONTH PERIOD

ENDING 9-10-87

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

SIGNED <u>J. T. Jackson</u>	TITLE <u>Partner</u>	DATE <u>9-8-86</u>
(This space for Federal or State office use)		
APPROVED BY <u>Org. Sgd. Charles S. ...</u>	TITLE <u></u>	DATE <u>9-11-86</u>
REMARKS OR APPROVAL IF ANY:		

Subject to  
Like Approval  
by State

\*See Instructions on Reverse Side