

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1474

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 ☒ GAS WELL ☒ OTHER ☐ *Water Injection*

2. NAME OF OPERATOR *Jenneco Oil Company*

3. ADDRESS OF OPERATOR *Box 1031, Midland, Texas 79701*

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

5. LEASE DESIGNATION AND SERIAL NO. *NM 0610*

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME *S.W. Henshaw Premier Unit*

9. WELL NO. *14*

10. FIELD AND POOL, OR WILDCAT *Henshaw, West Grayburg*

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA *Sec. 18, T-16-S, R-30-E*

12. COUNTY OR PARISH *Eddy* 13. STATE *New Mex.*

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.) *3765*

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 type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <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) <i>Convert to Water Inj.</i> <input checked="" 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.)*

4-2-69

- 1. Pulled tubing, gas valves and packer*
- 2. Chucked TD @ 2820'*
- 3. Ran injection tubing with packer at 2717'*
- 4. Began injection 6-7-69*

RECEIVED

AUG 1 - 1969

U. S. G.
ARTESIA, OFFICE

RECEIVED

JUL 31 1969

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED *L.M. Williams* TITLE *Production Engineer* DATE *7-30-69*

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL ONLY:

TITLE _____

DATE _____

ACCEPTED FOR RECORD PURPOSES ONLY
JUL 31 1969
Date *7-30-69* ACTING District Engineer *[Signature]*

*See Instructions on Reverse Side