

Form 1-64
(July 1965)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIP
(Other instructions on reverse side)

Form Approved
Budget Bureau No. 42-81421

5. LEASE DESIGNATION AND SERIAL NO.

LC-029431

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

RECEIVED

1. ☐ OIL ☐ GAS ☐ OTHER ☒ MIN

2. NAME OF OPERATOR

NEW OIL OIL COMPANY

3. ADDRESS OF OPERATOR

P.O. Box 1235

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

1900' FNL & 1900' FEL of Section 30

14. PERMIT NO.

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

3833' GLM

7. UNIT AGREEMENT NAME

Square Lake Flood (East)

8. FARM OR LEASE NAME

Vickers

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Square Lake (G.S.A.)

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

30-16S-31E

NMPM

12. COUNTY OR PARISH

Eddy

13. STATE
New Mexico

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

NOTICE OF INTENTION TO:

TEMP WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) Temporarily Abandon ☒

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

XX

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.)

This well was shut in May 1972 due to economic limit. We intend to temporarily abandon this well and hold for further evaluation within the next two years.

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

SIGNED

TITLE Superintendent

DATE 10-28-74

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE
APPROVED WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY

DATE

UNLESS FURTHER
APRIL 1-1975

*See Instructions on Reverse Side