

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(See instructions on reverse side)

Copy to SF

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form to report on a well drilled or to deepen or plug back to a different reservoir.
Use APPLICATION FOR PERMIT for such proposals.)

RECEIVED

LC-CE 114

1. NAME OF OPERATOR
A. HECO Production Company ✓

2. ADDRESS OF OPERATOR
BOX 68, HOBBS, N. M. 88240

3. LOCATION OF WELL
Report location clearly and in accordance with State requirements.
See also space 17 for well location.
At surface

1650' FSLY 2310' FEL Sec. 27 (Unit J, NW 1/4 SE 1/4)

14. PERMIT NO.

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

7. NAME OF WELL

8. FARM OR RANCH

9. WELL NO.

10. FIELD AND ZONE

11. SURVEY NO.

27-17-27 NW 1/4

12. COUNTY OF WELLS

EDDY

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT

TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING
FRACTURE TREATMENT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
HOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDON TREAT*
CEASE WELL	CHANGE PLANS	(Other) <i>Squadrone</i>	
(Other)		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log.)	

17. REPORT PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated cost of starting proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all major zones pertinent to this work.)

Set 15' (21') 1 1/2" conductor pipe @ 21' w/ squadrone on 9-3-73. Pactus Dry Corp. Drilled out @ 21' w/ 1 1/2" hole 10:10 AM 9-5-73. On 9-10-73 8 7/8" OD 32' K-55 casing was set @ 1792' w/ 600 sq. Incon + 2% GEL + 100 sq. Incon 2% CCK. Did not circ. Cemented to 1" down annulus w/ 135 sq Incon x circulated to surface. After WOC 18 hours tested casing w/ 1500 psi for 30 min. Best test. Reduced hole to 7 7/8" @ 1792' and resumed drilling.

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

SIGNED *R. J. Yorkum*
(This space for Federal or State office use)

TITLE *Regional Assistant*

DATE *9-11-73*

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED
SEP 12 1973
H. L. BEEKMAN
ACTING DISTRICT ENGINEER

244-USGS-Per
1-Div
1-Sup
1-RRV
1-ARCO

*See Instructions on Reverse Side

SEP 12 1973
U.S. GEOLOGICAL SURVEY
WATER RESOURCES DIVISION