

**N. M. O. C. C. COM**  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPL  
(Other instructions  
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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.)

**RECEIVED**

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. <div style="text-align: center;">NM-0149953</div>	
2. NAME OF OPERATOR <div style="text-align: center;">JAN 19 1977</div> GEORGE A. CHASE ✓		6. IF INDIAN, ALLOTTEE OR TRUST NAME	
3. ADDRESS OF OPERATOR <div style="text-align: center;">O. C. C. ARTESIA, OFFICE</div> Box 637, Artesia, NM 88210		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990' FSL & 1650' FWL, Sec. 27, T 16S, R 31E, N.M.P.M.		8. FARM OR LEASE NAME <div style="text-align: center;">Jeffers Fed</div>	
14. PERMIT NO.		9. WELL NO. <div style="text-align: center;">20</div>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <div style="text-align: center;">4045' GR</div>		10. FIELD AND POOL, OR WILDCAT <div style="text-align: center;">Square Lake</div>	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <div style="text-align: center;">Sec. 27, T16S, R31E</div>		12. COUNTY OR PARISH <div style="text-align: center;">Eddy</div>	
13. STATE <div style="text-align: center;">NM</div>			

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 checked="" 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 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.)\*

1-4-77 Spud 11" hole.  
 1-6-77 TD 400'. Ran 400' 8 5/8" 24 & 28# and cemented with 150 sacks Class C cement with 2% Ca Cl<sub>2</sub>. Cement circulated. WOC and down 48 hrs.  
 1-9-77 Pressure tested cement 1200#. Held OK.

**RECEIVED**

JAN 18 1977

U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED Charles W Hicks TITLE Representative DATE 1-12-77

(This space for Federal or State office use)

APPROVED BY Joe D. Larr TITLE ACTING DISTRICT ENGINEER DATE JAN 18 1977  
 CONDITIONS OF APPROVAL, IF ANY: