

NMOCG COPY

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE*
(Other instructions on re-verse side)

Copy to 17

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		JUN 22 1978	
2. NAME OF OPERATOR Fred M. Newman, Inc. ✓		D. C. C.	
3. ADDRESS OF OPERATOR Box 7140 Midland, Texas 79703		ARTESIA, OFFICE	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit letter G, 1980' FNL & 1980' FEL		5. LEASE DESIGNATION AND SERIAL NO. NM-15007	
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
		7. UNIT AGREEMENT NAME	
		8. FARM OR LEASE NAME Conoco Federal	
		9. WELL NO. 1	
		10. FIELD AND POOL, OR WILDCAT High Nitro	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 10-16S-29E	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3723.7' - GR	
		12. COUNTY OR PARISH Eddy	
		13. STATE New Mex.	

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 checked="" 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) <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.)*

4/6/78 Well was drilled to 2481'. There was no show of oil. Well to be plugged and abandoned. To pull 7" casing from 1901' and set cement plugs from 2000-1900', 1540-1440', 445-345', and from 50' to surface. Starting date 4/6/78. per USGS.

Verbal approval by Joe Lara, USGS, Artesia, NM. 4/6/78.

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

SIGNED

TITLE

engineer

DATE

4/6/78

(This space for Federal or State office use)

APPROVED BY

TITLE ACTING DISTRICT ENGINEER

DATE

JUN 22 1978

CONDITIONS OF APPROVAL, IF ANY: