Form 9-331 (May 1963)

16.

SUBMIT IN TRIPY ATE NTERIOR (Other instructio) 1 re-

. 1			Dunker					
	5.	LEASE	DESIGN	ATION	AND	SERIA	AL I	ì
	l	NM-C	987					

GEOLOGICAL SURVEY	NM-998/
SUNDRY NOTICES AND REPORTS ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A
Use "APPLICATION FOR PERMIT— for such proposition,"	7. UNIT AGREEMENT NAME

(Do not use this form for proposals to drill or t Use "APPLICATION FOR PEF	N/A	
OIL GAS OTHER	RECEIVED	7. UNIT AGREEMENT NAME N/A
2. NAME OF OPERATOR  Carl A. Schellinger	MAR 2 1 1978	8. FARM OR LEASE NAME EXXON Federal
3. ADDRESS OF OPERATOR P. O. Box 447, Roswell, NM 882	201 <b>a.c.c.</b>	9. WELL NO.  1 10. FIRLD AND POOL, OR WILDCAT
4. LOCATION OF WELL (Report location clearly and in ac See also space 17 below.) At surface	cordance with any State remulements ica	Red-Lake-Und. G.
660' FSL & 660' FWL		11. SEC., T., R., M., OR BLK. AND SURVEY OF ARMA 29, T-16-S, R-29-E
15 DIRVATION	(Show whether DF. RT. GR. etc.)	12. COUNTY OR PARISH 13. STATE

Eddy 3636.6 GR

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

NOTICE OF INTENTION TO:			SUBSEQUENT EMICAL OF			
CEST WATER SHUT-OFF CRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	M A	CLL OR ALTER CASING ULTIPLE COMPLETE BANDON*		(Norm - Papart regult	ALTERING WELL ALTERING CABING ABANDONMENT*  Tace casing s of multiple completion on Well pletion Report and Log form.)	
(Other)						

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 somes pertinent to this work.) •

Spudded well at 9:30 a.m. 2-9-78. Drilled 10" hole to 275', Ran 7 joints 8 5/8" 20# Casing, Texas pattern shoe, cemented with 100 sx Class H, 2% CaCl, Plug down 9:30 a.m. 2-17-78. WOC 20 hrs. Drilling ahead with 8" tools.

RECEIVED

MAR 1 6 1978 U.S. GEULUGICAL SURVEY ARTESIA, NEW MEXICO

18. I hereby certify that the thrigoing is true and correct	TITLE Operator	DATE 2-21-78
(This space for Federal or State office use)  APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	ACTING DISTRICT ENGINEER	DATE MAR 2 0 1978