

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP DATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC064222

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Featherstone A

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Square Lake(G, SA)

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

Section 1, T17S, R29E

12. COUNTY OR PARISH 13. STATE

Eddy

N. M.

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

C. E. LaRue and B. N. Muncy, Jr.

3. ADDRESS OF OPERATOR

P. O. Box 196 Artesia, N. M. 88210

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

660' FNL and 660' FWL Section 1, T17S, R29E

14. PERMIT NO.

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

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

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.) *

Well plugged by setting bridge plug above perforations with 10 sacks cement on top of bridge plug. Oil string shot off at 1890'. Pumped 30 sacks of cement at cut off point, 30 sacks cement from 900'-1,000' at base of salt, 30 sacks cement at base of surface pip 10 sacks cement at surface, with heavy mud between all plugs. Dry hole marker set, and location cleaned.

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

SIGNED

TITLE

Operator

DATE

4/22/80

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) GEORGE H. STEWART

TITLE

ACTING DISTRICT ENGINEER

DATE

JUL 10 1980

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side