

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Las Cruces 028775 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

F. M. Robinson "B" Unit I

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson

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

Sec. 27-T17S-R29E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

**SUNDY NOTICES AND REPORTS ON WELLS**

(Do not use this for U.S. Geological Survey proposals to drill or to deepen or plug back to a different reservoir.  
"APPLICATION FOR PERMIT—" for such proposals.)

1.

OIL WELL ☒ GAS WELL ☐

OTHER

2. NAME OF OPERATOR

Sinclair Oil & Gas Company

3. ADDRESS OF OPERATOR

P. O. Box 1920, Hobbs, New Mexico

4. LOCATION OF WELL (Report  
See also space 17 below.)  
At surface

Location clearly and in accordance with any State requirements.\*

1980' fr the South line and 1980' fr the West line

14. PERMIT NO.

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

3526' GR

16.

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

NOTE 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\*

Temp.

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COM-  
pleted work. If well  
pertinent to this work.\*

COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any  
directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-

Well shut-in. Held for future development in waterflood operations.

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

SIGNED

TITLE Superintendent

DATE 6-19-67

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL

JUN 21 1967

R. L. BEEKMAN

ACTING DISTRICT ENGINEER

IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side

Original cc: USGS, Artesia  
cc: Regional Office  
cc: file

RECEIVED  
JUN 21 1967  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO