

## 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <b>Convert to Water Injection</b>                                                                           |                                                | 7. UNIT AGREEMENT NAME<br><b>Grayburg Jackson - S.A.</b>                   |                                |
| 2. NAME OF OPERATOR<br><b>WINDFOHR OIL COMPANY</b>                                                                                                                                                                           |                                                | 8. FARM OR LEASE NAME                                                      |                                |
| 3. ADDRESS OF OPERATOR<br><b>1202 First National Bank Building, Fort Worth, Texas 76102</b>                                                                                                                                  |                                                | 9. WELL NO.<br><b>28</b>                                                   |                                |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface <b>2200' from north and 660' from east lines of<br/>         Section 13-17S-30E.</b> |                                                | 10. FIELD AND POOL, OR WILDCAT<br><b>Grayburg Jackson, GB-SA</b>           |                                |
|                                                                                                                                                                                                                              |                                                | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br><b>Sec. 13-17S-30E</b> |                                |
| 14. PERMIT NO.                                                                                                                                                                                                               | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | 12. COUNTY OR PARISH<br><b>Eddy</b>                                        | 13. STATE<br><b>New Mexico</b> |

**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"/><br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> | PULL OR ALTER CASING                                                                                  | <input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> |
| FRACTURE TREAT                                    |                                                                                                                                          | MULTIPLE COMPLETE                                                                                     |                                                                                                                                          |
| SHOOT OR ACIDIZE                                  |                                                                                                                                          | ABANDON*                                                                                              |                                                                                                                                          |
| REPAIR WELL                                       |                                                                                                                                          | CHANGE PLANS                                                                                          |                                                                                                                                          |
| (Other) <b>Deepen &amp; Convert to Water Inj.</b> |                                                                                                                                          | (Other) _____                                                                                         |                                                                                                                                          |
| X                                                 |                                                                                                                                          | (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.) \*

It is proposed to deepen and convert this well to water injection by the following work:

1. Pump 20 barrels hot water down casing and pump out.
2. Deepen well from 3514' to approximately 3565'.
3. Run Gamma Ray-Neutron log.
4. Inject water down casing until pressure resistance is developed.
5. Set gravel and cal seal plug above pay. Cement 4½" liner from above pay to approximately 50' above 7" casing shoe.
6. Clean out to bottom. Run 2-3/8" O.D. tubing internally coated with plastic or cement lining with tension packer on bottom. Set packer in liner near the top and resume water injection.

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

**SIGNED**

TITLE Consultant

DATE \_\_\_\_\_

(This space for Federal or State office use)

**TITLE**

DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

MAY 1 1964

EEKMA

**\*See Instructions on Reverse Side**

## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 17:** Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

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