

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

SUBMIT IN TRI  
(Other instructio  
verse side)

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.)

**RECEIVED**

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. <b>LC-054988-B</b>	
2. NAME OF OPERATOR <b>Petroleum Corporation of Texas</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR <b>P. O. Box 911 Breckenridge, TX 76024</b>		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <b>Unit Letter "E", 1650' FNL &amp; 330' FWL, Section 20, Township 17-S, Range 30-E, Eddy County, New Mexico</b>		8. FARM OR LEASE NAME <b>Jenkins "B" Federal</b>	
14. PERMIT NO.		9. WELL NO. <b>1</b>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>3651' DF</b>		10. FIELD AND POOL, OR WILDCAT <b>Grayburg Jackson</b>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>20-17S-30E</b>	
		12. COUNTY OR PARISH <b>Eddy</b>	
		13. STATE <b>NM</b>	

**AUG - 9 1978**

**D. C. C.  
ARTESIA, OFFICE**

**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 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) **Run down hole equipment** ☒

(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.)\*

Gentlemen:

On April 19, 1978, we ran a 2" x 7" Guiberson Shorty Tension Packer to 2881' and set packer. Tubing is 2-3/8" Salta Lined.

Depth of tubing is 2880'.

Annulus was loaded with treated water.

*Posted  
LD-3  
8-11-78  
Chadwick  
SUN well.*

**RECEIVED**  
**MAY 15 1978**  
**U.S. GEOLOGICAL SURVEY**  
**ARTESIA, NEW MEXICO**

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

SIGNED Arthur Boice

TITLE Division Superintendent DATE May 10, 1978

(This space for Federal or State office use)

(Orig. Sgd.) **ALBERT R. STALL**

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

TITLE ACTING DISTRICT ENGINEER

DATE JUL 21 1978