

NMOCC COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN THE CASE*
(Other instructions on re-
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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-054988 (A)	
2. NAME OF OPERATOR Petroleum Corporation of Texas ✓		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 911 Breckenridge, TX 76024		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 2310' FNL & 2310' FWL, Unit F, Section 21, Township 17-S, Range 30-E, NMPM, Eddy County, New Mexico		8. FARM OR LEASE NAME Berry Federal	
14. PERMIT NO.		9. WELL NO. 4	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GL 3648' KB 3659'		10. FIELD AND POOL, OR WILDCAT San Andres Jackson	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit F, Sec. 21, T-17-S, R-30-E, NMPM	
		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

16. 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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	(Other) Set bottom plug <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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 May 19, 1978, we set a cast iron bridge plug @ 6630' with a 35' cement plug on top of plug. This seals off the only open perms @ 6652' - 6858'.

The work conforms to our proposal submitted on Form 9-331, dated January 24, 1978.

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

SIGNED

Arthur Bbice

TITLE

Division Superintendent

DATE

May 22, 1978

(This space for Federal or State office use)

APPROVED BY

Lee J. Lara

TITLE

ACTING DISTRICT ENGINEER

DATE

MAY 31 1978

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side