

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Form approved  
Budget Bureau No. 42-B1424  
5. LEASE DESIGNATION AND SERIAL NO.

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.)

6. INDIAN ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
9. WELL NO.  
10. FIELD AND POOL, OR WILDCAT  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
12. COUNTY OR PARISH  
13. STATE

1. WELL NAME  
2. NAME OF OPERATOR  
3. ADDRESS OF OPERATOR

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DEC 2 1974

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also Space 17 below.)  
2310' FNL and 1650' FEL of Section 31,  
Twp. 17-S, Rge. 30-E

14. DEPTH IN FEET  
15. EXPLANATIONS (Show whether DE, RT, GR, etc.)

3568- DF

LC-060529  
Beeson F  
#5  
Loco Hills  
Sec. 31, T-17-S, R-30-E  
Eddy N.M.

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

16.1. NATURE OF INTENTION TO

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF  
FRACTURE TREAT  
SHOOT OR ACIDIZE  
REPAIR WELL  
(Other)

WATER SHUT-OFF  
FRACTURE TREATMENT  
SHOOTING OR ACIDIZING  
(Other) Shut-In Status

REPAIRING WELL  
ALTERING CASING  
ABANDONMENT\*

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.\*

We request that this well be held for possible recompletion in the Queen or Seven Rivers Zones.

Well was shut in January, 1969 for economical or mechanical reasons.

After feasibility studies are completed work should be commenced within the next two years.

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OCT 23 1974  
U.S. GEOLOGICAL SURVEY  
ARTESIAN AREA

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

SIGNED *Ray Crow*

TITLE District Superintendent

DATE Oct. 23, 1974

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE  
UNLESS FURTHER APPROVED, WELL MUST BE PUT TO BENEFICIAL USE OR PLUGGED BY

DATE

OCT 1 - 1975

\*See Instructions on Reverse Side

*H. J. Beeson*

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*(The following text is extremely faint and largely illegible due to poor scan quality. It appears to be a list or index of names and locations.)*

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 04-17-2008 BY 60322  
UCBAW/STP/STP/STP/STP/STP