

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN T  
(Other Instruc  
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 <input type="checkbox"/> GAS <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Injection                                                                                                                                                                                                      |  | RECEIVED<br>OCT 1 1968<br>MAR 16 1966                      |  |
| 2. NAME OF OPERATOR<br><del>SINCLAIR OIL CORPORATION</del><br>Sinclair Oil & Gas Company                                                                                                                                                                                                                                    |  | 8. FARM OR LEASE NAME<br>J. L. Keel "A"                    |  |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 1920, Hobbs, New Mexico                                                                                                                                                                                                                                                                 |  | 9. WELL NO.<br>14                                          |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>660 feet from the North line and 521 feet from the West<br>line of Section 7-T17S-R31E                                                                                           |  | 10. FIELD AND POOL, OR WILDCAT<br>Grayburg Jackson         |  |
| 14. PERMIT NO.                                                                                                                                                                                                                                                                                                              |  | 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>3733' GR |  |
| 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data                                                                                                                                                                                                                                               |  | 12. COUNTY OR PARISH<br>Eddy                               |  |
| 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.)* |  | 13. STATE<br>New Mexico                                    |  |

| 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 type="checkbox"/>         | (Other) Convert oilwell to WIW                 | X                                        |

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

- 3-5-66 Drilled C.I. Bridge Plug @ 2950' and cleaned out to 3502'. 3502' Original TD).
- 3-6-66 Ran Gamma Collar log 1500-3500' and jet perforated Grayburg 3030-45', 3060-65', 3112-18' w/56-3/8" holes.
- 3-7-66 M.A. washed Vacuum perfs. 3104-08, 3112-18' w/500 gals. Max. Press. 3000#, Min. Press. 600# @ 2.5 BFM. Inst. SIP 200#, vacuum in 1 min. Acidized Premier perfs. 3030-45' w/250 gals. MA Max. Press. 1850#, Min. Press. 600# @ 2.2 BPM, Inst. SIP 500#, 5 mins. SIP 200#. Acidized Premier perfs. 3060-65' w/250 gals. Max. Press. 1000#, Min. Press. 600# @ 2.3 BPM, Inst. SIP 300#, vacuum in 1 min. Ran 2-3/8" OD tubing and Model R packer to 2827', seat nipple @ 2822'.
- 3-8-66 Injected 100 bbls. fresh water into Grayburg perfs. 2892-3200' and Open Hole 3425-3502' in 5 hours. Max. Press. 20#. Converted to Water Injection Well in Keel-West Waterflood Area eff: 3-8-66.

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

SIGNED

TITLE

Superintendent

DATE

3-9-66

(This space for Federal or State office use)

APPROVED BY

TITLE

DISTRICT ENGINEER

DATE

11-1-66

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

Orig&2cc: USGS Artesia  
cc: Regional Office  
cc: file