

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

INSTRUCTIONS ON REVERSE SIDE

U. S. GEOLOGICAL SURVEY  
Form No. 42-R1424  
AND SERIAL NO.

5. LEASE D. AND SERIAL NO.  
NM 0555569

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Green Fed.

9. WELL NO.  
4

10. FIELD AND POOL, OR WILDCAT  
Loco Hills Pool

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

31- 17 S R 29 E

12. COUNTY OR PARISH 13. STATE

Eddy New Mexico

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Hugh L. Johnston, Sr.

3. ADDRESS OF OPERATOR

Roswell, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1650' From the North Line & 2310' from East Line.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3640 GR

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(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 spudded this well on July 24, 1965. On July 27, 1965 we Ran 461' of 8 5/8" surface Casing, cemented with 50 Sacks of Portland Cement. After waiting 24 Hrs, Tests showed complete water shut off- Drilling Continued.

RECEIVED

AUG 2 1965

N. C. C.  
ARTESIA, OFFICE

RECEIVED

JUL 29 1965

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

*Celestia E. Johnston*

TITLE Secretary

DATE July 29, 1965

(This space for Federal or State office use)

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JUL 30 1965  
H. L. WELLMAN  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side