

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
NM 7752

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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Dorchester Exploration, Inc. & Cecil Rhodes

3. ADDRESS OF OPERATOR
1204 Vaughn Building, Midland, Texas 79701

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

660' FSL & 1980' FEL Sec 7, T-17-S, R-30-E

14. PERMIT NO.

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

3662 G L

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Anderson-Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., OR BEK. AND SURVEY OR AREA

7-17-30

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:

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*

Running and testing log.

(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 and 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.)*

On 3-31-72 treated Morrow perforations from 10,844-84 with 9,000 gals Howco My-T-Frac and 2500# 20-40 sand. Breakdown pressure 4200 PSI, Max. Press. 9,200 PSI. Average treating pressure 8,500 PSI at 6 BPM. ISDP 5,400 PSI. Comp. at 11:40 A.M.

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

SIGNED

TITLE

Engineer

DATE

10/24-72

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED
OCT 26 1972

R. L. BECKMAN

ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones; or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; and or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

U.S. GOVERNMENT PRINTING OFFICE: 1984-0-35229
GPO: 837-499
507-851

For Instructions on Reverse Side

(This space for Federal or State office use)

APPROVED BY
ADMINISTRATOR OF LANDS

SIGNED

DATE

OFFICE

ADDRESS

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

1. Name of landowner (if not Federal or State land)

2. Name of person making report (if not Federal or State land)

3. Name of person making report (if not Federal or State land)

4. Name of person making report (if not Federal or State land)

5. Date

6. Name of person making report (if not Federal or State land)

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