

RECEIVED BY
Form 3160-5
November 1983)
Formerly 9-8310
FEB 7 1985

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR. LOCATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-028731 (B)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

M. Dodd "B"

9. WELL NO.

49

10. FIELD AND POOL, OR WILDCAT

Grbg Jackson SR Q G SA

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

Sec. 14-T17S-R29E

14. PERMIT NO.

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

3606.7' GR

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

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) TD, casing & cement job

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.) *

TD 3550'. Ran 87 jts. 5 1/2" 15.50# new casing to 3534', cemented w/400 sax Halliburton lite w/8# salt, 1/2# floccel; 400 sax Class C w/6# salt, 3/10 of 1% CFR-2, plug down @ 9:45 a.m. 2/2/85, did not circulate. Ran temperature survey - cement top @ 780'. WOC 18 hours, tested casing to 1500# f/30 minutes-held okay.

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

SIGNED

TITLE

Production Clerk

DATE

2/5/85

(This space for Federal or State office use)

APPROVED BY

ACCEPTED FOR RECORD

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FEB 6 1985

*See Instructions on Reverse Side