## UNITED STATES M. O. C. C. CORDINATES DEPARTME OF THE INTERIOR Verse side) GEOLOGICAL SURVEY 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.)

|          | Form app<br>Budget B | roved,<br>ureau N | ). 42-R142 | 4. |
|----------|----------------------|-------------------|------------|----|
| 5. LEASE | DESIGNAT             | ION AND           | SERIAL NO. | _  |

7. UNIT AGREEMENT NAME

|    |    | NI      | VI  | 148   | 43 |       |      |   |
|----|----|---------|-----|-------|----|-------|------|---|
| 6. | IF | INDIAN, | ALL | OTTEE | OR | TRIBE | NAME | - |

| OIL GAS OTHER  |   |  |
|--|---|--|
| 2. NAME OF OPERATOR  |   | 8. FARM OR ADASE NAME  |
| ANADARKO PRODUCTION COMPANY /  | Travis C Federal                          |  |
| 3. ADDRESS OF OPERATOR   |   | 9. WELL NO.  |
| P.O. Box 67, Loco Hills, New Mexic   | 0 88255                                   | 4  |
| 4. LOCATION OF WELL (Report location clearly and in accordance w-<br>See also space 17 below.)                                     | A any State requirements.                 | 10. FIELD AND POOL, OR WILDCAT                                     |
| At surface 990' FSL & 990  | υ' FEL                                    | Artesia 11. sec., t., r., m., or blk. and                          |
| Section 13, T-   | 18S, R-28E                                | SURVEY OR AREA   |
| Eddy County,   | New Mexico                                | 13-18S-28E   |
| 14. PERMIT NO.   15. ELEVATIONS (Show whe  | ether DF, RT, GR, etc.)                   | 12. COUNTY OR PARISH 13. STATE                                     |
| Not availa   | ble                                       | Eddy New Mex.  |
| Check Appropriate Box To India   | ate Nature of Notice, Report, or          | Other Data   |
| NOTICE OF INTENTION TO:  | SUBSE                                     | QUENT REPORT OF:   |
| TEST WATER SHUT-OFF PULL OR ALTER CASING   | WATER SHUT-OFF                            | REPAIRING WELL   |
| FRACTURE TREAT MULTIPLE COMPLETE   | FRACTURE TREATMENT                        | ALTERING CASING  |
| SHOOT OR ACIDIZE ABANDON*  | SHOOTING OR ACIDIZING                     | ABANDONMENT*   |
| REPAIR WELL CHANGE PLANS   | (Other)                                   |  |
| (Other)  |   | ts of multiple completion on Well<br>pletion Report and Log form.) |
| 17. DESCRIBE PROPOSED . COMPLETED OPERATIONS (Clearly state all p proposed work. If well is directionally drilled, give subsurface | ertinent details, and give pertinent date | s, including estimated date of starting any                        |
|  | RECEIVED                                  | -  |
|  | KECEIALD                                  |  |
|  | OCT 23 1975                               | RECEIVED   |
|  | O. C. C.<br>ARTESIA, OFFICE               | UCT & CONEY  |
|  |   | U.S. GEOLOGICAL SURVEY<br>NEW MEXICO                               |
| 18. I hereby certify that the foregol ig is true and correc'   |   | Wir.   |
| SIGNED GLORGE L. TITLE   | Petroleum Engineer                        | DATE Sept. 30, 1975  |
| (This space for Federal or State office use)   |   |  |
| APPEOVED AT TITLE OF APPROVAL, IF ANY UNLESS FURTHER ANY UNLESS FURTHER AND THE PRINT TO BENSEIGN                                  | PEROVED. WELL MUST                        | DATE   |
| A CONDITIONS OF APPROVAL, IF ANY UNLESS FURTHER A  | PPROVED. WELL INC. USE OR PLUGGED BY      |  |
| OCT 2 13/5 BE PUT TO BENEFICA  | - 1976                                    |  |
|  | uctions on Reverse Side                   |  |