

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE  
(Other instructions on reverse side)

Form approved  
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.  
LC 029395 (b)

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  
SINCLAIR OIL CORPORATION

3. ADDRESS OF OPERATOR  
P. O. Box 1920, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface  
660' fr N line and 660' fr E line

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3734.64 DF

6. IF INDIAN ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Turner "B"

9. WELL NO.  
22

10. FIELD AND POOL, OR WILDCAT  
Fren

11. SEC., T., E., M., OR BLEK. AND SURVEY OR AREA  
29-T17S-R31E

12. COUNTY OR PARISH 13. STATE  
Eddy New Mexico

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

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) <input type="checkbox"/>	

(Other) Shut Well In

(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.)\*

12-11-68 Propose to shut well in. Non-Productive. To be held for future use in a waterflood operation.

RECEIVED

RECEIVED

DEC 12 1968

DEC 16 1968

O. C. C.  
ARTESIA, OFFICE

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

SIGNED

TITLE

Superintendent

DATE

12-11-68

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE

Orig & 4cc: USGS, Artesia  
cc: Southern Region (West Texas)  
cc: file

\*See Instructions on Reverse Side

RECEIVED  
DEC 11 1968  
L. BEEKMA