

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TWO COPIES*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. LC 043 214
2. NAME OF OPERATOR A. J. Smith, et al	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Copy to S. 7
3. ADDRESS OF OPERATOR Box 631 Artesia, New Mexico	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310' S. of E. line and 2310' W. of E. line of Sec. 7 - 1' . 30E, T. 1. N. M.	8. FARM OR LEASE NAME Masteller
	9. WELL NO. Masteller #1A
	10. FIELD AND POOL, OR WILDCAT Leco Hills
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7-103-30E. T. 1. N. M.
14. PERMIT NO.	12. COUNTY OR PARISH Eddy
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3516'	13. STATE N. M.

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 checked="" 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"/>	

(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.)*

432.6" of 8 5/8" casing was run Jan. 11, 1964 and cemented with 70 bags of cement by Denton Oil Well Cementing Company. Cement was allowed to set until Jan. 13th. when plug was drilled and hole tested for water. None was found and drilling was resumed.

RECEIVED
MAR 25 1964
O. C. C.
ARTESIA, OFFICE

RECEIVED
MAR 13 1964
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED A. J. Smith TITLE Drilling Contractor DATE 1/18/64

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
MAR 24 1964
F. L. BELLIAM
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side