

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPlicate*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC - 060122

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Trigg-Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

27-18S-27E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Sinclair Oil & Gas Company

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

1980' fr North line & 660' fr West line

14. PERMIT NO.

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

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) Drill Stem Tests

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.)

- 1-21-67 Drill Stem Tests #1. Bone Springs 5670-5755'. 5/8" X 1" choke. No. water cushion. Open 1 hour w/weak blow dead in 8 mins. Recovered 15' drilling fluid w/show oil on top. 5 mins. IOFP 45#, 1 hr. ISIP 145#, 1 hr. IOFP 45#, FFP 57#, 1 hr. FSIP 108#. Temp. 110°.
- 1-26-67 Drill Stem Test #2. Lower Bone Springs 6750-6850'. 5/8" X 1" choke. No water cushion. Open 1 hour and 15 mins. w/good blow, dead in 35 mins. Recovered 470' slightly gas cut drilling mud. 5460' salty sulphur water 26000 PPM Chl. 5 mins. IOFP 464#, 1 hr. ISIP 2745#, 1 1/4 hrs. IOFP 464#, FFP 2745#, 2 hrs. FSIP 2745#.
- 1-29-67 Drill Stem Test #3. Upper Wolf 7172-7222'. 5/8 x 1" choke. No Water Cushion. Open 2 hrs. w/good blow decreasing to weak blow in 30 mins., gas to surface in 34 mins. TSTM. Weak blow remainder of test. Recovered 20' free oil Gvty. 40.2 plus 60' oil & gas cut mud. GOR 160:1 determined by instrument in test tool. 5 mins. IOFP 56#, 1 hr. ISIP 1458, 2 hr. IOFP 56#, FFP 69#, 2 hrs. FSIP 1088#. Max. Temp. 124°.
- 2-4-67 Drill Stem Test #4. Cisco 8058-78'. 5/8" X 1" choke. No Water Cushion. Open 2 hrs. w/good blow, gas to surface in 10 mins. 147 MCF, 15 mins. 108 MCF, 53 MCF, 45 mins. & stabilised, recovered 1815 drlg mud. Rec. 520 CC dist. gvtty. 55.1 in sample tool w/GOR 1200:1. 5 mins. IOFP 132#, 1 hr. ISIP 3828#, 2 hrs. IOFP 222#, FFP 464#, 2 hr. FSIP 3714#. Hyd. 3828, temp. 135°.

(Continued on attached sheet).

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

SIGNED

TITLE

Superintendent

DATE

(This space for Federal or State office use)

APPROVED
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

U.S. GEOLOGICAL SURVEY
Artesia, N.M.
cc: USGS Artesia
cc: Regional Office
cc: Partner, file