

1. NAME OF WELL (Report location clearly and in accordance with any State requirements.
Not less space (17 below)
At surface

2. NAME OF COMPANY DRILLING

3. ADDRESS OF COMPANY

4. ADDRESS OF OPERATOR

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
Not less space (17 below)
At surface

6. DEPTH OF WELL (Show whether to, at, or, etc.)

7. ELEVATIONS (Show whether to, at, or, etc.)

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

NOTICE OF INTENTION TO:

1. STOP WORK

2. PULL OR ALTER CASING

3. MULTIPLE COMPLETE

4. ABANDON*

5. CHANGE PLANS

SUBSEQUENT REPORT OF:

1. WATER SHUT-OFF

2. FRACTURE TREATMENT

3. SHOOTING OR ACIDIZING

4. (Other) *Refracturing*

5. REPAIRING WELL

6. ATTACHING CASING

7. ABANDONMENT*

(Note: Report results of mud line completion on Well Completion or Recirculation Report and Log form.)

17. Describe in detail all operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any operations, if well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to the operation.)

Continued by Co. on 8-12-70. 11" hole 1:30 PM, 8-12-70. On 8-14-70, 8 7/8" OD 2 1/2" I.D. casing was set @ 1465' 11" and on 8-14-70 2 1/2" hole was set. Cement job. After 11:00 PM hours, tested casing w/ 1500 PSI for 30 min. Test O.K.

Reamed hole to 7 7/8" @ 1455' and resumed drilling.

RECEIVED

JUN 29 1970

O. C. C.
ARTESIA, OFFICE

RECEIVED

JUN 25 1970

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

18. This report is true and correct

SIGNED

TITLE: AREA SUPERINTENDENT

DATE

(This space is for District or State office use)

APPROVED FOR RECORD PURPOSES

JUN 26 1970
Date

ACTING

District Engineer