

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Include instructions on reverse side)

Form approved,
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-025605

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

None

7. UNIT AGREEMENT NAME

Scoggin Draw Deep Unit

8. FARM OR LEASE NAME

Scoggin Draw Deep Unit

9. WELL NO.

1-Y

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 31-18S-27E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Read & Stevens, Inc. ✓

3. ADDRESS OF OPERATOR

P.O. Box 2126, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

2086' FEL & 766' FSL, Sec. 31-18S-27E, N.M.P.M.

14. PERMIT NO.

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

3276.4 GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

(Other) ☐

surface casing ☒

(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.)*

Spudded 2:10 P.M. 5/26/71

Ran 11 jts. of 12 3/4" 33# csg. 348' set @ 330' RKB.

Cemented w/300 sacks Class C w/2% CaCl₂, 1/2# flo-seal per sack.

Cement circulated.

Plug down @ 9:30 A.M. 5/27/71

WOC 18 hrs.

Pressure test to 1500# for 30 minutes.

Test O.K.

RECEIVED

JUN 7 1971

G. C. C.
ARTESIA, OFFICE

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

SIGNED

TITLE Vice-President

DATE June 1, 1971

(This space for Federal or State Government)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: