

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N. M. O. C. C. COPY
SUBMIT IN THIS FORM
(Other instructions on reverse side)

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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 surface 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. N.M. 0924	
2. NAME OF OPERATOR Gene A. Snow		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 606 So. 13th, Lovington, N.M. 88260		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 660' FEL & 1980' FNL Sec. 31, T.S. 18S, Rg. 29E		8. FARM OR LEASE NAME Alcott	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3425.32 GL. O.C.C. ARTESIA, OFFICE		10. FIELD AND POOL, OR WILDCAT Duo Queen - Gyg. S.A.	
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 31, T.S. 18S, Rg. 29E	
		12. COUNTY OR PARISH Eddy	
		13. STATE N.M.	

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ARTESIA, NEW MEXICO

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SEP 24 1975

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <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.)*

- Perforated with Wellex Super Dyna Jet 1/2" holes as follows: 3 holes 1792-94; 3 holes 1799-1801; 3 holes 1804-06; 9 holes 1854-62; 6 holes 2135-40; 3 holes 2306-08; 5 holes 2312-16; 4 holes 2338-41; 6 holes 2445-50; 5 holes 2454-58; 7 holes 2466-72; 3 holes 2510-12; 3 holes 2517-19; 3 holes 2798-2800; 4 holes 2821-24; 4 holes 2826-29; 5 holes 2836-40; 7 holes 2932-38; 5 holes 3416-20; 5 holes 3454-58. 93 holes total.
- Fraced with 90,000 gallons MY-T frac using 60,000 #20/40 Sand, 27,500 #1/20 Sand in 6 different stages.

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

SIGNED

Gene A. Snow

TITLE

Operator

DATE

9-1-75

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side