

**UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE\*  
(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. <b>OIL WELL</b> <input checked="" type="checkbox"/> <b>GAS WELL</b> <input type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		5. <b>LEASE DESIGNATION AND SERIAL NO.</b> NM 01159
2. <b>NAME OF OPERATOR</b> FRANKLIN, ASTON & FAIR, LTD.		6. <b>IF INDIAN, ALLOTTEE OR TRIBE NAME</b>
3. <b>ADDRESS OF OPERATOR</b> P. O. Box 1090 Roswell, New Mexico 88201		7. <b>UNIT AGREEMENT NAME</b>
4. <b>LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  990' FWL & 330' FNL		8. <b>FARM OR LEASE NAME</b> NELSON-FEDERAL
14. <b>PERMIT NO.</b>		9. <b>WELL NO.</b> #4
15. <b>ELEVATIONS</b> (Show whether DF, RT, GR, etc.) 3567.6 GR		10. <b>FIELD AND POOL, OR WILDCAT</b> Loco Hills, Grayburg, Queen, San Andres
16. <b>COUNTY OR PARISH</b> Eddy		11. <b>SEC., T., R., M. OR BLM. AND SURVEY OR AREA</b> Sec. 4 T-18S R-30E
17. <b>STATE</b> NM		18. <b>COUNTY OR PARISH</b> Eddy

**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 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) Set 5 1/2" production 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.) \*

On September 3, 1975, 5 1/2" 15.5# casing was set at 2837' with 150 sacks class "C" cement for open hole completion. Total depth is 2883' in the Loco Hills Sand.

**RECEIVED**

SEP 15 1975

**O. C. C.**  
**ARTESIA, OFFICE**

**RECEIVED**

SEP 11 1975

**U. S. GEOLOGICAL SURVEY**  
**ARTESIA, NEW MEXICO**

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

SIGNED Krant M. Smith

TITLE Geologist

DATE 9-9-75

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

**APPROVED**  
SEP 15 1975  
G. L. BEEKMAN  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side