

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 42410
2. NAME OF OPERATOR Fred Pool Drilling, Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 1393, Roswell, N.M. 88201	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any state regulations. See also space 17 below.) At surface 990' FSL & 990 FWL SW/4 SW/4	8. FARM OR LEASE NAME Comstock Federal
10. FIELD AND FOOT, OR WILDCAT Artesia Qn GB SA	9. WELL NO. 3
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12-18S-27E	12. COUNTY OR PARISH Eddy
13. STATE NM	
14. PERMIT NO. 30-015-25545	15. ELEVATIONS (Show whether depth, GR, etc.) 3574 Gr

RECEIVED BY
JUN 05 1986
O. C. D.
ARTESIA, OFFICE

16. 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"/>
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"/>	

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 checked="" 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.)*

May 30, 1986: Perforated from 1446-1456 ft. ten holes, one per foot.

Acidized with 250 gallons 15% FE Acid.

Frac well with 15,000# 20/40 sand and 15,000# 10/20 sand.

Put well on pump to recover load.

ACCEPTED FOR RECORD

Guo
JUN 4 1986

CAPISBAY, NEW MEXICO

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

SIGNED *Rente Pool*

TITLE Vice President

DATE 6-2-86

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

