

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT 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 different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Wtr. Injection		5. LEASE DESIGNATION AND SERIAL NO. LC 063613	
2. NAME OF OPERATOR B. & A. Operating Co. ✓		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Fed. Unit # 08001 8772	
3. ADDRESS OF OPERATOR P.O. Box 136, Lovington, N.M. 88260		7. UNIT AGREEMENT NAME Culwin Queen Unit.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980 F/SL. 1980 F/EL. Unit ltr. 'J'.		8. FARM OR LEASE NAME	
14. PERMIT NO.		9. WELL NO. 17	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3513 GL.		10. FIELD AND POOL, OR WILDCAT Shugart.	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1 -19/S - 30/E.	
		12. COUNTY OR PARISH Eddy.	
		13. STATE N.M.	

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"/>	WATER SHUT-OFF <input checked="" 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) plugged back <input checked="" type="checkbox"/> TA	
(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.)*

8 5/8" Csg. to 760' w/ 50 sx.
5 1/2" Csg. to 3253' (DR.) W/ 125 sx. - P.B.T.D. 3130'.
Csg. Perfs. 3080' - 3112'.

Set 'Titan' C. I. Bridge Plug @ 3041' w/ 40' cmt. plug above.
By: Ry-Co, Hobbs, N. M.

RECEIVED
JAN 30 1975
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED D.R. Bell TITLE Optns. Mgr. N.M. DATE Jan. 7, 1975

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:TITLE
UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL, OCTOBER
OCT 1 - 1975

DATE

*See Instructions on Reverse Side

APPROVED
JAN 30 1975
H. L. BEEKMAN
ACTING DISTRICT ENGINEER