

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved,  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.  
N.M. 00370 Copy 631  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## SUNDRY NOTICES AND REPORTS ON WELLS

This form is to be used for reports on wells for which a permit has been issued for such purposes.

NAME OF WELL  
NAME OF OPERATOR

Harlan Oil Company ✓

ADDRESS OF OPERATOR

P. O. Box 304, Artesia, N. M. 88210

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

English Federal

9. WELL NO.

10. FIELD AND ZONE, OR WILDCAT

No. Hackberry-Yates-SR

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA195  
20-T478-R31E

12. COUNTY OR PARISH

Eddy

13. STATE

14. PERMIT NO.

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

3471 G.L.

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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 or about February 6, 1975 we propose to ~~acidize~~ fracture treat the well in an effort to stimulate production.

ILLEGIBLE

RECEIVED

FEB 24 1975

O. C. C.  
ARTESIA, OFFICERECEIVED  
FEB 20 1975U. S. GEOLOGICAL SURVEY  
POSWELL, NEW MEXICO

RECEIVED

FEB 21 1975

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

RECEIVED

FEB 14 1975

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

I hereby certify that the foregoing is true and correct

SIGNED

TITLE Agent

DATE 2-11-75

(This space for Federal or State office use)

TITLE

DATE

\*See Instructions on Reverse Side