

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT
(Other in
verse side)

REPLICATE

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0107697

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jones Federal "E"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undesignated Lusk
straw11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 23, T-19-S, R-31-E

12. COUNTY OR PARISH 13. STATE

Eddy

New Mexico

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"/>	2. NAME OF OPERATOR Tenneco Oil Company	3. ADDRESS OF OPERATOR Box 1031, Midland, Texas	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL & 660' FFL of Section 23	14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3545 DF
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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.) *

Set & Cmtg 4 1/2" OD, 11.6# csg at 11,600 w/180 sx 50-50 Pozmix Class C
tailed in with 200 sx sealment. Pressure tested csg to 1000 PSI for 30 minutes
after 48 hrs. Held OK. Top of cmt 10,190 by temp survey. Perforated interval
11,530-40 w/4 BSPP. Acidized 2500 gal ret. acid. Max press 2400 PSI. Injection
rate 6 BPM. Recovered load oil and potential tested.

RECEIVED

DEC 30 1964

D. C. C.
ARTESIAL OFFICE

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

SIGNED

R.C. Bowers

TITLE Dist. Office Supervisor

DATE 12-22-64

(This space for Federal or State office use)

TITLE

DATE

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:DEC 28 1964
H. L. BERNARD
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side