

N. M. O. C. G. COPY  
STATE  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

*Copy to*

Budget Bu. No. 42-11111

5. LEASE DESIGNATION AND SERIAL NO.  
**NM-044-5684-A**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
**Kerr-McGee Federal**

9. WELL NO.  
**1**

10. FIELD AND POOL OR WILDCAT  
**Lusk (Strawn)**

11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA  
**Sec. 33, T-19-S, R-31-E**

12. COUNTY OR PARISH  
**Eddy**

13. STATE  
**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 ☐ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
**Southwestern Natural Gas, Inc.**

3. ADDRESS OF OPERATOR  
**412 First State Bank Bldg., Midland, Texas 79701**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface  
**660' FNL & 1980' FWL, Sec. 33, T-19-S, R-31-E**

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)  
**3418' Gr.**

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 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) Report of 4-1/2 csg. Setting	
(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.)\*

Reached TD of 11,450'

Ran 363 jts. of 4-1/2", 11.60#, LT&C, N-80, J-55- csg.

Set 4-1/2" csg. @ 11,441'

Cemented w/125 sx.Incor 2% gel

Plug down @ 4:45 P.M., 11-28-66 - Top Cmt. outside 4-1/2 csg. @ 11,000'

RECEIVED

MAR 22 1967

O. C. C.  
ARTEDIA, OFFICE

RECEIVED  
MAR 24 1967

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

SIGNED *F. L. Dickler* TITLE Geologist DATE Mar. 23, 1967

(This space for Federal or State office use)

APPROVED BY *A. L. Baker* TITLE ACTING DISTRICT ENGINEER DATE MAR 24 1967

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side