

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N.M.O.C.D. COPY

SUBMIT IN TRIPLICATE*
(Other Instructions on Reverse side)Form approved,
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-3620

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

D. L. HANNIFIN FEDERAL

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

SHUGART

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

1-19S-31E

12. COUNTY OR PARISH

EDDY

13. STATE

NM

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 JOE DON COOK ✓ | |
| 3. ADDRESS OF OPERATOR P.O. BOX 159, ROSWELL NEW MEXICO 88201 | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface UNIT LETTER "L": 330 FEET FROM THE WEST 2110 FEET FROM THE SOUTH | |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR-3617.6 |

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.)*

5-9-79

TRIP RODS & TUBING. CLEAN OUT WELL TO TD, RUN BOND LOG. DETERMINE
IF WELL HAS COMMUNICATED. IF SO TAKE CORRECTIVE ACTION. RECEIVED

MAY 14 1979

O. C. C.
ARTESIA, NEW MEXICO

RECEIVED

MAY 9 1979

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

Marlyn A. Ray

TITLE SECRETARY

DATE 5-9-79

(This space for Federal or State office use)

APPROVED BY

Joe J. Lora

TITLE ACTING DISTRICT ENGINEER

DATE

MAY 11 1979

CONDITIONS OF APPROVAL, IF ANY: