

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRI
(Other instruction
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Federal 069144

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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"/>		7. UNIT AGREEMENT NAME Big Eddy	
2. NAME OF OPERATOR Perry R. Bass		8. FARM OR LEASE NAME J. N. Fidel Federal	
3. ADDRESS OF OPERATOR Box 1178, Monahans, Texas 79756		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL and 660' FWL		10. FIELD AND POOL, OR WILDCAT U S Delaware	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3433' Orig. DF	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T21S, R29E	
		12. COUNTY OR PARISH Eddy	
		13. STATE N. Mex.	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input checked="" type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<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.)*

13 3/8" ODCSA 3175' with cement circulated to the surface.

9 5/8" ODCSA 9406' with cement circulated from 9406' to 2970' (overlap of 205').

(1) Plan to cut 9 5/8" OD casing at 2970' or at the highest point above 2970' to recover a maximum amount of 9 5/8" casing.

(2) Place a cement plug of 10 sks in the top of the 13 3/8" OD casing and install a regulation marker for permanent abandonment.

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APR 3 1967

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

SIGNED Jack L. Lemon

TITLE Division Engineer

(This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
MAR 31 1967
H. L. BEEKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

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MAR 31 1967
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO