

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Form approved.
Budget Bureau No. 1004-0125
Expires August 31, 1985

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

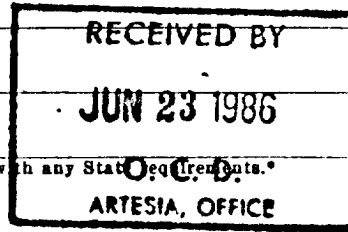
John H. Trigg

3. ADDRESS OF OPERATOR

Box 520, Roswell, NM 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State or Federal Data.
See also space 17 below.)
At surface

660' FNL & 990' FEL



14. PERMIT NO.

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

3343' GR

5. LEASE DESIGNATION AND SERIAL NO.

NM 06299

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal M

9. WELL NO.

2-33

10. FIELD AND POOL, OR WILDCAT

S33-T20S-R30E-1

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

33-00-00

12. COUNTY OR PARISH

Eddy

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

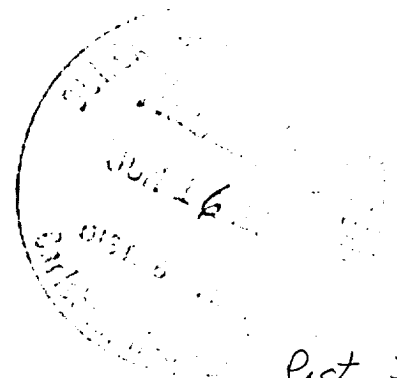
ABANDONMENT*

☐
☐
☒

(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.) *

1. Run bond Log & set CIBP @ 1595' w 50' cmnt.
2. Set solid cmnt plug across salt sec from 1450' to 420' (R-111A Potash)
3. Set 50' surface plug & dry hole marker
4. Cleaned Loc & Leveled Pitts.



Post IO-2
6-27-86
PVA

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

SIGNED

John H. Trigg

TITLE

Production Forman

DATE

6/12/86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: