

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIP DATE  
(Other instructions  
reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 07260

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	2. NAME OF OPERATOR Ralph Lowery
3. ADDRESS OF OPERATOR Box 832, Midland, Texas, 79701	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1470' from West Line and 1230' from South Line of Sec. 33
14. PERMIT NO. NSL-367	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4091 GR

7. UNIT AGREEMENT NAME Indian Hills Unit	8. FARM OR LEASE NAME Indian Hills Unit
9. WELL NO. 5	10. FIELD AND POOL, OR WILDCAT Indian Basin (Upper Penn)
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 33-21-S-24-E	12. COUNTY OR PARISH Eddy
13. STATE New Mexico	

## 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.)\*

ON February 11, 1966 ran 8 5/8" 32# J+L Casing, Set @ 2525'. Cemented with 500 SMC 50/50 Posmix, 4% Jel, 1/4# Flocele, 1150 SMC 50/50 Posmix 4% Jel, 1/4# Flocele and 150 SMC regular neat Cement circulated to surface. Plugdown @ 7:00AM 2/12/66. after 36 hours pipe tested with 1500#. Pipe tested. O.K.

RECEIVED

FEB 21 1966

J. C. F.  
RECEIVED

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

SIGNED

TITLE

DATE

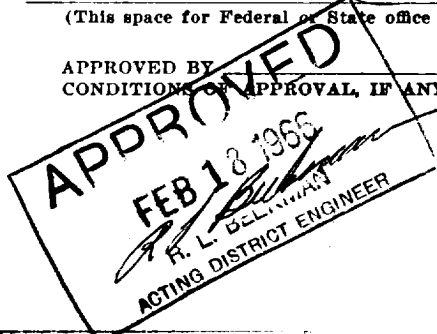
(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE



\*See Instructions on Reverse Side