

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRII
(Other instruction.
reverse side)

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Form approved.
Budget Bureau No. 42-R1424.

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"/>		7. UNIT AGREEMENT NAME <i>Indian Hills Unit</i>
2. NAME OF OPERATOR <i>Ralph Lowe</i>		8. FARM OR LEASE NAME <i>Indian Hills Unit</i>
3. ADDRESS OF OPERATOR <i>PO Box 832, Midland, Texas 79701</i>		9. WELL NO. <i>5</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>1470' from West Line and 1230' from South Line of Sec. 33</i>		10. FIELD AND POOL, OR WILDCAT <i>Indian Basin (Upper Penn)</i>
14. PERMIT NO. <i>NSL-367</i>		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>33-21-S-24-E</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>4091 ER</i>		12. COUNTY OR PARISH <i>Eddy</i>
		13. STATE <i>New Mexico</i>

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 type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <i>Tubing + etc.</i>	

(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 March 6, 1966 Ran 2 3/8" J-55 4.70# Tubing. Set @ 7706'.
Well Drilled to T.D. 7738'. T.I.W. Packer set @ 7504'.
Treated well on March 7, 1966 with 500 gal. Mud acid and
2000 gal. D.-S.-50 acid. Plus 31 barrels Diesel oil.
Well Tested Thru 3/4" Choke, flowed 16,000 MCFPD
Tubing Flowing Pressure 1100#. Shut in Pressure 2400#.
Well Completed + Shut in.

RECEIVED

MAR 16 1966

O. C. C.
ARTESIA OFFICERECEIVED
MAR 14 1966
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED *[Signature]*TITLE *agent*DATE *3/9/66*

(This space for Federal or State office use)

APPROVED BY *[Signature]*
CONDITIONS OF APPROVAL, IF ANY:TITLE *DISTRICT ENGINEER*DATE *3/11/66*

*See Instructions on Reverse Side